

Submitted in lieu of Form 3160-5 (June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT" - for such proposals.

RECEIVED

MAY 04 2016

Farmington Field Office
Bureau of Land Management

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

1. Type of Well:

Gas

2. Name of Operator:

ConocoPhillips

3. Address and Phone No. of Operator:

P. O. Box 4289, Farmington, NM 87499
(505) 326-9700

4. Location of Well, Footage, Sec. T, R, U:

FOOTAGE: 2350' FNL & 1798' FWL
S: 11 T: 031N R: 008W U: F

5. Lease Number:

SF-080854

6. If Indian, allottee or Tribe Name:

7. Unit Agreement Name:

1
NMNM-78424D-DK NMNM 78424A-MV

8. Well Name and Number:

SAN JUAN 32-8 UNIT 29

9. API Well No.

3004534093

10. Field and Pool:

DK - BASIN::DAKOTA
MV - BLANCO::MESAVERDE

11. County and State:

SAN JUAN, NM

12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Recompletion	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Non-Routine Fracturing
<input type="checkbox"/> Abandonment	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Water Shut Off
	<input checked="" type="checkbox"/> Other- Re-Delivery	<input type="checkbox"/> Conversion to Injection

13. Describe Proposed or Completed Operations

This well was re-delivered on 4/20/2016 and produced natural gas and entrained hydrocarbons.

Notes: REDELIVERED / SHUT IN FOR MORE THAN 90 DAYS DUE TO EQUIPMENT ISSUE / RETURNED TO PRODUCTION

TP: 387 CP: 387 Initial MCF: 186

Meter No.: 82252

Gas Co.: WFC

Proj Type.: REDELIVERY

OIL CONS. DIV DIST. 3

MAY 09 2016

14. I Hereby certify that the foregoing is true and correct.

Signed

Dollie L. Busse
Dollie L. Busse

Title: Regulatory Technician

Date: 5/4/2016

ACCEPTED FOR RECORD

(This Space for Federal or State Office Use)

APPROVED BY: _____

Title: _____

Date: _____

MAY 05 2016

FARMINGTON FIELD OFFICE
BY: *CMW*

CONDITION OF APPROVAL, if any: _____

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements.

NMOCD

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