UNITEDSTATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

SHINDRY	NOTICES	AND	REPORTS	ON	WELLS

FORMAPPROVED	
OM B No. 1004-0137	
Expires: March 31,	2007

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5.	Lease	Serial	No.

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6	ĭf	Indian	Allottee	or Tribe	Name
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	nis form for proposals ell. Use Form 3160-3				b. if indiai	n, Allottee or Tribe Name	
	IPLICATE - Other ins	structions on i	revei	rse side.	7. If Unit	or CA/Agreement, Name and/or No.	
I. Type of Well OilWell	X Gas Well Other						
	A Gas Well Guici					ame and No.	
2. Name of Operator	4.			}	9. API W	JAN 32-8 UNIT 258A	
ConocoPhillips Company 3a. Address	<u>/</u>	3b. Phone No. (Gnelug	le area code)	30-045		
PO BOX 4289 Farmingto	on NM 87499	(505)32		′ 1	10. Field	and Pool, or Exploratory Area	
4. Location of Well (Footage, Se	c, T., R., M., or Survey Desc	cription)			BASIN	FRUITLAND COAL	
291 SOUTH 127 EAST UL: P, Sec: 9, T: 32N, R:	. 8W 291 FSL & 127	FEL			11. County or Parish, State SAN JUAN NEW MEXICO		
12. CHECK AI	PPROPRIATE BOX(ES)T	O INDICATE N	ATUI	RE OF NOTICE, RE	PORT, O	R OTHER DATA	
TYPE OF SUBMISSION			TY	PEOF ACTION			
Notice of Intent	Acidize AlterCasing Casing Repair	Deepen FractureTrea New Constru		Production (Star Reclamation Recomplete	t/Resume)	Water Shut-Off Well Integrity X OtherSpud report	
X Subsequent Report	Change Plans	Plug and Aba		Temporarily Aba	ındon	[II] Ottologa Topon	
Final Abandonment Notice		Plug Back		Water Disposal			
5/21/06 MIRU 5/22/06 Spud well at 12 240ft. Circ on bottom for surface casing, STGS # .25#/sx D-029 Cellophar fresh wtr. WOC. NU BO	r 15 minutes. TOOH. #233ft. Cmtd w/ 150 s ne Flakes (174 cu ft).	Run 5 joints of x Class G cen Displaced dov	f 9 5/ nent vn to	/8", 32.3#, H-40 w/2% S-001CC, 190ft w/ 15 bbl	.,hei)	288 288 288 28 28 28 28 28 28 28 28 28 2	
APD / ROW		•	,		/	26 の 三m	
Report Toc		94 72	UN 2.)UB			
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14. Thereby certify that the fore Name (Printed/Typed)	going is true and correct						
Juanita Farrell		Т	itle	Regulatory Analy	yst		
Signature June	Farreis	C	Date	05/24/2006			
	THIS SPACE FOR	R FEDERAL (OR S	TATE OFFICE	USE		
Approved by			1	itle		Date	
Conditions of approval, if any, are			or			Date	
certify that the applicant holds lega which would entitle the applicant	t to conduct operations thereo	n.		Office			
Title 18 U.S.C. Section 1001 and Ti States any false, fictitious or fraud	tle 43 U.S.C. Section 1212, madulent statements or represent	ke it a crime for any p tations as to any ma	person atter wi	knowingly and willfully atthin its jurisdiction.	to make to a	ny departies and the second se	

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