

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO. 1004-0135
Expires: November 30, 2000

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other: COAL BED METHANE		5. Lease Serial No. NMSF080854
2. Name of Operator CONOCOPHILLIPS COMPANY		6. If Indian, Allottee or Tribe Name
3a. Address 4001 PENBROOK, SUITE 346 ODESSA, TX 79762		7. If Unit or CA/Agreement, Name and/or No. NMNM78424B
3b. Phone No. (include area code) Ph: 915.368.1352		8. Well Name and No. SAN JUAN 32-8 UNIT 244A
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 14 T31N R8W SESE 1055FSL 690FEL 36.89299 N Lat, 107.63801 W Lon		9. API Well No. 30-045-32309-00-S1
		10. Field and Pool, or Exploratory BASIN FRUITLAND COAL
		11. County or Parish, and State SAN JUAN COUNTY, NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Surface Disturbance
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

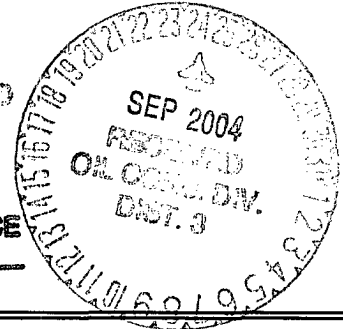
13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

this sundry is filed to add the attached cathodic protection plan for this well.

ACCEPTED FOR RECORD

SEP 22 2004

FARMINGTON FIELD OFFICE
BY 12



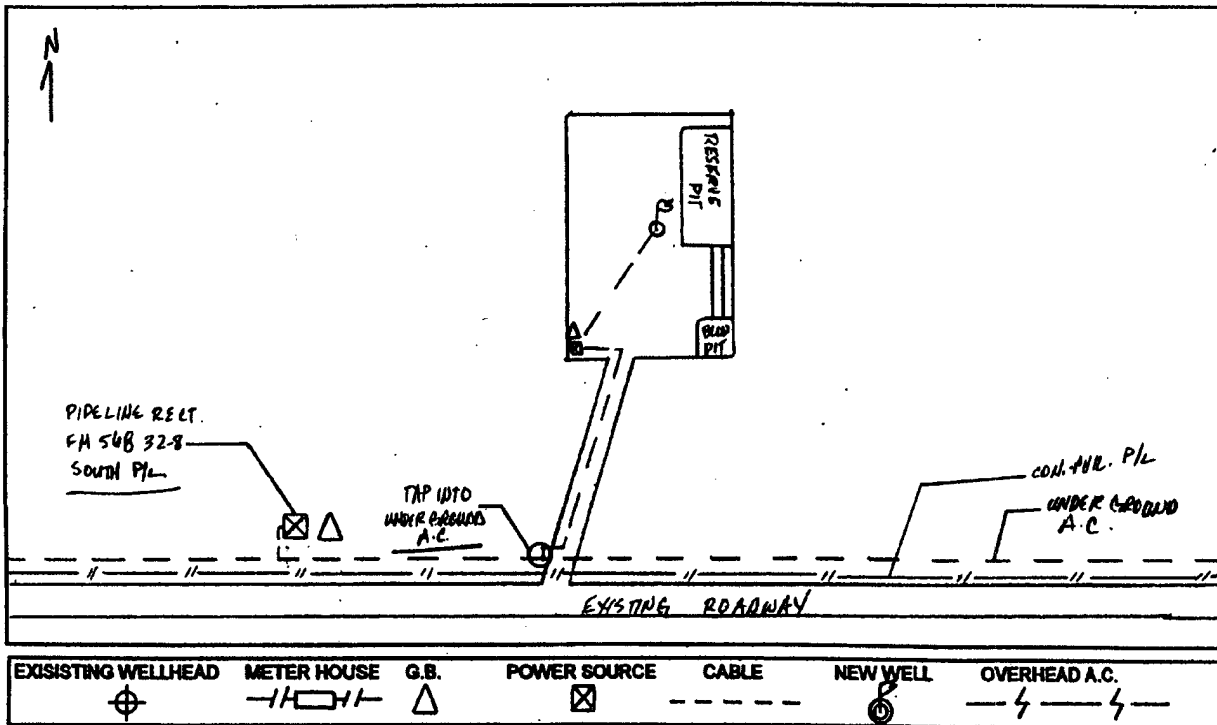
api # 30 045 323 09



CATHODIC PROTECTION PLAN FOR NEW WELL

WELL NAME: S.J. 328 # 244A LEGALS: P-14-31-8 COUNTY: S.J.

PURPOSED C.P. SYSTEM: DRILL G.B. & SET RECT. ON S.W. CORNER OF LOCATION. TRENCH
Q 225' A.C. FROM MAIN ROADWAY TO RECT. THEN TRENCH Q 150' W8 NEG FROM
RECT TO WELL HEAD



COMMENTS: _____

NEAREST POWER SOURCE: UNDER GROUND A.C. DISTANCE: 200'
 PIPELINES IN THE AREA: 1- CON. THL. P/L

TECHNICIAN: DATE: 4/16/04

Rocky Mountain Regional Headquarters
 1608 Schofield Lane • Farmington, New Mexico 87401
 Office: 505-326-0272 • Fax: 505-326-6755