Form 3160-5 (August 1999)

## **UNITED STATES**

DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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

SUNDRY N	OTICES A	AND REF	PORTS O	N WELLS	
Oo not use this	form for p	roposals	to drill or	to re-enter	an
nandoned well					

NMSF081089	
6. If Indian, Allottee or Tribe Name	

SUBMIT IN TRIF	7. If Unit or CA/Agreement, Name and/or No. NMNM78424B					
1. Type of Well ☐ Gas Well ☐ Other: COAL BED METHANE				8. Well Name and No. SAN JUAN 32-8 237A		
2. Name of Operator Contact: VI		CKI WESTBY Mail: Vicki.R.Westby@conocc	WESTBY Vicki.R.Westby@conocophillips.com		9. API Well No. 30-045-32369-00-S1	
3a. Address 4001 PENBROOK, SUITE 346 ODESSA, TX 79762	b. Phone No. (include area code Ph: 915.368.1352	)	10. Field and Pool, or Exploratory BASIN FRUITLAND COAL			
4. Location of Well (Footage, Sec., T.	, R., M., or Survey Description)			11. County or Parish, as	nd State	
Sec 23 T31N R8W NESE 1640FSL 940FEL				SAN JUAN COUNTY, NM		
12. CHECK APPR	OPRIATE BOX(ES) TO I	NDICATE NATURE OF	NOTICE, RI	EPORT, OR OTHER	DATA	
TYPE OF SUBMISSION		ТҮРЕ О	F ACTION			
Nation of Laterat	☐ Acidize	Deepen	□ Product	ion (Start/Resume)	☐ Water Shut-Off	
□ Notice of Intent	Alter Casing	Fracture Treat	☐ Reclam		☐ Well Integrity	
Subsequent Report	Casing Repair	☐ New Construction	□ Recomp			
☐ Final Abandonment Notice	Change Plans	☐ Plug and Abandon	_	arily Abandon	Other Surface Disturbance	
	Convert to Injection	☐ Plug Back	□ Water I			
testing has been completed. Final Ab determined that the site is ready for fi this sundry is filed to add the a	nal inspection.)  Ittached cathodic protection	•	words offer it	SEP OLCO DIS	2004	
14. Thereby certify that the foregoing is  Commi  Name (Printed/Typed) VICKI WE	Electronic Submission #32 For CONOCOPHIL itted to AFMSS for processin	1904 verified by the BLM We LIPS COMPANY, sent to the Ig by ADRIENNE BRUMLEY Title AGEN	e Farmington on 09/20/2004			
	0.5.	7,0211	•			
Signature (Electronic S	ubmission)	Date 07/09/2	2004			
	THIS SPACE FOR	FEDERAL OR STATE	OFFICE U	SE		
Approved By		Title			Date	
Conditions of approval, if any, are attached ertify that the applicant holds legal or equivalent would entitle the applicant to conduct the equivalent to the equivalent to the equivalent to conduct the equivalent to the equivale	nitable title to those rights in the successions thereon.	Office				
Fitle 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent s	U.S.C. Section 1212, make it a cretatements or representations as to	ime for any person knowingly an any matter within its jurisdiction	nd willfully to m	nake to any department or	agency of the United	



## api# 303927488 3004532369

## **CATHODIC PROTECTION PLAN FOR NEW WELL**

WELL NAME: 5.1. 92-8 *2374 LE	EGALS: 1-25-91-8 COUNTY: 5.J.
	N S.W. EDGE OF LOCATION of THEN TREPEH @165'
1	55
	51 May 511
Act are as	
40	
EXISISTING WELLHEAD METER HOUSE G.B.	POWER SOURCE CABLE NEW WELL OVERHEAD A.C. — 4 — 4 — 4 —
COMMENTS: SELF - CONTAINED CV SHST	ICM ON NELLYAO
NEAREST POWER SOURCE: ACCOSS HOY 5	
FECHNICIAN: State Jessey:	DATE: 4-16-04
ocky Mountain Regional Headquarters	
	Lane • Farmington, New Mexico 87401 05-326-0272 • Fax: 505-326-6755