submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

2007 JUN 15 PM 2: 36

RECEIVED
PLM
210 FAR   NM

1. **Type of Well**
   GAS

2. **Name of Operator**

   ConocoPhillips

3. **Address & Phone No. of Operator**

   PO Box 4289, Farmington, NM 87499 (505) 326-9700

4. **Location of Well, Footage, Sec., T, R, M**
   Sec., T--N, R--W, NMPM

   Surf P (SESE) 661' FSL & 1097' FEL, Sec. 11, T31N, R8W NMPM

5. **Lease Number**
   SF-080854

6. **If Indian, All. or Tribe Name**

7. **Unit Agreement Name**

   San Juan 32-8 Unit

8. **Well Name & Number**

   San Juan 32-8 Unit #29M

9. **API Well No.**

   30-045-34075

10. **Field and Pool**

    Blanco MV/Basin DK

11. **County and State**
    San Juan Co., NM

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

Type of Submission	Type of Action		
__X__ Notice of Intent	_____ Abandonment	_____ Change of Plans	_X_ Other Intermediate Casing Depth
	_____ Recompletion	_____ New Construction	
_____ Subsequent Report	_____ Plugging	_____ Non-Routine Fracturing	
	_____ Casing Repair	_____ Water Shut off	RCVD JUN18'07
_____ Final Abandonment	_____ Altering Casing	_____ Conversion to Injection	OIL CONS. DIV.

DIST. 3

13. Describe Proposed or Completed Operations

ConocoPhillips requests the following change on the intermediate depth:

The APD intermediate casing depth was approved for 3807'. We are requesting to set the intermediate casing @ 3857' to ensure Adequate separation between the Lewis and the water in the Pictured Cliffs. We will be running 423' of 4 ½" 11.6# J-55 LT & C Casing on the bottom of the production string, 4 ½' 10.5# J-55 ST & C in the middle, & 4 ½" 11.^# J-55 LT & C on the top 1350' Of the production string. Cement volumes will be adjusted accordingly.

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

Signed _Tracey N Monroe_   Tracey N. Monroe Title Regulatory Technician Date 6/15/07

(This space for Federal or State Office use)
APPROVED BY Original Signed: Stephen Mason ____ Title _____ Date __JUN 1 8 2007__
CONDITION OF APPROVAL, if any:

NMOCD