

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: March 31, 2007

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.

2007 JUL 26 PM 3 52

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator
ConocoPhillips Company

3a. Address
PO BOX 4289 Farmington NM 87499

3b. Phone No. (include area code)
(505)326-9597

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
**1010 SOUTH 745 EAST
UL: P, Sec: 27, T: 32N, R: 7W**

5. Lease Serial No.

NMSF078543

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.

SAN JUAN 32-7 UNIT 206A

9. API Well No.

30-045-31810

10. Field and Pool, or Exploratory Area

BASIN FRUITLAND COAL

11. County or Parish, State

**SAN JUAN
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/Install Pump
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<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.)

07/09/07 MIRU Key 940. ND WH NU BOP - PT ok. Pull donut. TIH & tag 10' fill. Clean out to PBTD w/air and mist. Circ hole clean. POOH w/2 3/8" tbg and tally. MU BHA. RIH w/111 jnts 2 7/8", 6.40#, J-55 tbg and land @ 3482'. ND BOP NU WH. RIH w/insert pump and rods. Space out pump. Load tbg and PT to 500 psi. Bleed off pressure. RDMO 07/11/07

RCVD AUG3'07
OIL CONS. DIV.
DIST. 3

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Juanita Farrell

Title **Regulatory Specialist**

Signature

Date **07/25/2007**

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

ACCEPTED FOR RECORD

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

AUG 02 2007

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to the Bureau of Land Management or to any other agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

FARMINGTON FIELD OFFICE
BY **207**

(Instructions on page 2)

NMOCD