(October 1990)

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE\*

(See other instructions on reverse side) FOR APPROVED OMB NO. 1004-0137

Expires December 31, 1991

5 LEASE DESIGNATION AND SERIAL NO

## NMSF-079029 . IF INDIAN, ALLOTTEE OR TRIBE NAME

WELL COMP	LETION OR I	RECOMP	LETION	REP	ORT AND	LC	)G*	6. #	INDIAN, ALLOTTE	E OR TRIBE NAME		
18 TYPE OF WELL: OIL GAS X DRY CHOS E TO THE TOTAL OF THE								NMNM- 78424A-MVI				
								7 UNIT AGREEMENT NAME .				
6 TYPE OF COMPLETION:									San Juan 32-8 Unit			
NEW WORK DEEP PLUG DIFF RESVR Other NOV 0 2 2007									8. FARM OR LEASE NAME, WELL NO.			
									San Juan 32-8 Unit 39A			
2 NAME OF OPERATOR CONOCOPHILLIPS COMPANY Bureau of Land Management Log Field Office									9. API WELL NO.			
CONOCOPHILLIPS COMPANY  Bureau of Land Maining  ADDRESS AND TELEPHONE NO.  Family on Field Office									30-045-34281 ~ OOS \			
3 ADDRESS AND TELEPHONE NO. Familington 110									Blanco Mesaverde			
PO BOX 4289, Farmington, NM 87499 (505) 326-9700  4 LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*									11 SEC., T, R., M., OR BLOCK AND SURVEY			
	Jnit J. (NWSE), 14	•		,,	, , , , , , , , , , , , , , , , , , , ,			1	OR AREA			
At Bottom	, (ITTOL), IT	10 1 02 0 100	7 1 22					Sec. 3, T31N, R8W, NMPM				
At top prod. interval reported below									RCVD NOV 6 '07 DIL CONS. DIV.			
At total depth										UNS. DIV. IST. 3		
	,		14. PERMIT	NO.	DATE ISSUE	-D	<del></del>	12.0	OUNTY OR	13. STATE		
17. I LINWII NO. DATE ISSUED									PARISH	10. 01/112		
								<u></u>	San Juan	New Mexico		
	6. DATE T.D. REACHED		COMPL. (Ready	to prod.)		1	LEVATIONS (DF, R			19. ELEV. CASINGHEAD		
8/20/07	8/27/07		0/22/07			GL	6692'	KB	6708'	<u> </u>		
TOTAL DEPTH, MD &	IVD 21 PLUG, E	BACK T.D., MD &TV	VD 22. IF MUL	LTIPLE CC HOW M			NTERVALS DRILLED BY	ROTAR	Y TOOLS	CABLE TOOLS		
6156'	6140	a <b>,</b>	· •					1	X	ţ		
	/AL (S) OF THIS COMPLE		OM, NAME (MD AI	ND TVD)*				ــــــــــــــــــــــــــــــــــــــ	25 WAS DIREC	TIONAL		
Disease Management - FORM - FORM									SURVEY MADE			
Blanco Mesaverde 5230' - 6052'									No No			
26. TYPE ELECTRIC AND OTHER LOGS RUN  GR/CBL									27. WAS WELL CORED No			
			0.0000					٠		NO		
CASING SIZE/GRADE	I WEIGHT I DIET	I DEDTH SET			Report all string			200	<del> </del>			
9-5/8", H-40,J-5			12-1/4"				MENT, CEMENTING RECORD		AMOUNT PULLED  31 bbis			
7", J-55			8 3/4"						50 bbls			
4 -1/2", J-55 10.5# 6155'			6 1/4"				; 226sx (447cf)		<del>                                     </del>			
	LINER RI	ECORD		30.				ΤĹ	TUBING RECORD			
SIZE TOP (ME	) BOTTOM (MD)	SACKS CEME	NT* SCREE	SCREEN (MD)		DEPTH SET (MI		(MD)	PACKER SET (MD)			
		<b></b>			2-3/8" 4.7#		5969'					
DEPENDATION DECC	BD (Integral over and aver	<u> </u>			L		T 554671135	05115	1			
PERFORATION RECORD (Interval, size and number)  132. ACID, SHOT, FRACTUR  15744' - 6052' 420 gais 15% HC												
.324¢iuc @ .54	1011		<u> </u>	177 - 1	0002			ls Slickwater w/99.464#				
O/LMF 5744' - 6	052' = 30 holes		}					d & 1,077,900 scf N2				
NF/CH 5230 - 56	58' = 26 holes		5	230 - 5	658'		bls 15% HCL					
						s Slickwater w/92,494						
						20/4	0 Brady sand	& 1,08	0,900 scf of N	12		
E FIRST PRODUCTION	T PRODUC	CTION METHOD (F	lowing, gas lift, bu	PR moina-siz	RODUCTION se and type of number	1			IWELL STATUS (	Producing or shut-in )		
SI		· · · · · · · · · · · · · · · · · · ·	Flowin		, , , , , , , , , ,	,			SI	, , , , , , , , , , , , , , , , , , , ,		
E OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N FOR	OILBE	BL	GAS	-MCF	WATE	R-BBL	GAS-OIL RATIO		
	1		TEST PERIOD	1		1		1				
10/19/07	1	.5"		0 bòp		43 r	ncfh	<u>L</u>				
W TUBING PRESS	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL-BBL		GAS-MCF		WATER-BB	IL.		OIL GRAVITY-API (CORR		
P - 155#	SI - 325#		0 bopd		1023 mcfd		2 bwpd					
	(Sold, used for fuel, vente	d, etc )	о вори		1023 MCIU		z bwpu		TEST WITNESSE	D BY		
	g for facilities to	•	ore can fire	t deliv	er.							
LIST OF ATTACHMENT	S							ئـــــــــــــــــــــــــــــــــــــ	L			
is is a standal	one Mesaverd	e										
I hereby certify that the	oregoing and attached info	ormation is complet	e and correct as d	etermined	from all available r	ecords				<del></del>		
1	)											
GNED TITLE Regulatory Technician							DATE		11/2/2007			
oned James	lessin	TITE	LE Regulat	ory Tec	:hnician			DATE		11/2/2007		

In the 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department of agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

NOV 0 5 2007



White, cr-qr ss.

UM-AKEPSE -MINNIN

Ojo Alamo

.. OQ2/

2350'

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