Submitted in lieu of Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

DIST. 3

	FORM APPROVED
SUNDRY NOTICES AND REPORTS ON WELLS	Budget Bureau No. 1004-0135
Do not use this form for proposals to drill or to deepen or reentry to a	Expires: March 31, 1993
different reservoir	
Use "APPLICATION FOR PERMIT" - for such proposals	
Bureau of Land Manage	ement
1. Type of Well: Farmington Field Off	ice 5. Lease Number:
Gas	SF-078417-A
2. Name of Operator:	C. If Indian allattee or Tribe Name.
ConocoPhillips	6. If Indian, allottee or Tribe Name:
	7. Unit Agreement Name:
3. Address and Phone No. of Operator:	7. One Agreement Name.
P. O. Box 4289, Farmington, NM 87499	8. Well Name and Number:
(505) 326-9700	SAN JUAN 28-7 UNIT 220G
4. Location of Well, Footage, Sec. T, R, U:	SAN 30AN 20-7 GNIT 2230
FOOTAGE: 1665' FNL & 1910' FWL	9. API Well No.
S: 22 T: 028N R: 007W U: F	3003930276
	10. Field and Pool:
	DK - BASIN::DAKOTA
	MV - BLANCO::MESAVERDE
	11. County and State:
	RIO ARRIBA, NM
12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE	, REPORT, OTHER DATA
Notice of Intent Recompletion	Change of Plans
X Subsequent Report Plugging Back	New Construction
Final Abandonment Casing Repair	Non-Routine Fracturing
Abandonment Altering Casing	Water Shut Off
X Other-First Deliv	ery Conversion to Injection
13. Describe Proposed or Completed Operations	
This well was first delivered on 4/1/2008 and produced natural gas	s and entrained hydrocarbons.
TP: 875 CP: 670 Initial MCF	: 731
Meter No.: 88422	
Gas Co.: EFS	
14. I Hereby certify that the foregoing is true and correct. Signed Title: Rec	
14. I nereby certify that the foregoing is true and correct.	

(This Space for Federal or State Office

Marie E. Jaramillo

APPROVED BY:

Title:

ACCEPTED FOR RECORD

CONDITION OF APPROVAL, if any:

on

Title 18 U S C Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements FAT ALL A CEMIN THE

NMOCD

Date: