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submitted in lieu of Form 3160-5

JUN 27 2008

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

Bureau of Land Management
Farmington Field Office

Sundry Notices and Reports on Wells

- | | |
|--|---|
| <p>1. Type of Well
GAS</p> <p>2. Name of Operator

CONOCOPHILLIPS</p> <p>3. Address & Phone No. of Operator
PO Box 4289, Farmington, NM 87499 (505) 326-9700</p> | <p>5. Lease Number
SF-079012</p> <p>6. If Indian, All. or Tribe Name</p> <p>7. Unit Agreement Name
San Juan 31-6Unit</p> <p>8. Well Name & Number
San Juan 31-6Unit 4P</p> <p>9. API Well No.
30-039-30319</p> |
| <p>4. Location of Well, Footage, Sec., T, R, M
Unit O (SWSE), 1280' FSL & 1655' FEL, Sec. 4, T30N, R6W, NMPM
Unit P (SESE), 750' FSL & 1000' FEL, Sec. 4, T30N, R6W, NMPM</p> | <p>10. Field and Pool
Blanco MV/Basin DK</p> <p>11. County and State
Rio Arriba., NM</p> |

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

Type of Submission	Type of Action
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment <input type="checkbox"/> Change of Plans <input checked="" type="checkbox"/> Other - Spud
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion <input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging <input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair <input type="checkbox"/> Water Shut off
	<input type="checkbox"/> Altering Casing <input type="checkbox"/> Conversion to Injection

13. Describe Proposed or Completed Operations

06/26/08 MIRU Mote 209. Spud 12 1/4' hole 06/26/08 & drilled ahead to 235'. Circ hole. RIH w/7 jts, 9 5/8", 32.3#, H-40, ST&C csg & set @ 230'. RU to cement 06/26/08. Pre flush w/10bbl Mud Flush.. Pumped in 75sx (120cf-21bbl) Type I-II w/20% Flyash. Dropped plug & displaced w/14.4 bbl of H2O. Circulate 4bbbls cement to surface. RD, RR @ 18:30 on 06/26/08.

**RCVD JUL 1 '08
OIL CONS. DIV.
DIST. 3**

PT will be conducted by the drilling rig & recorded on the next report.

APD/ROW

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

Signed Sasha Spangler Sasha Spangler Title Regulatory Technician Date 06/27/08

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

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

ACCEPTED FOR RECORD

JUN 30 2008

**FARMINGTON FIELD OFFICE
BY [Signature]**

NMOCD