

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED

SEP 14 2009

Sundry Notices and Reports on Wells

1. Type of Well  
GAS

2. Name of Operator

*CP* **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

Unit N (SESW), 1170' FSL & 1590' FWL, Section 30, T26N, R3W, NMPM

5. Bureau of Land Management  
Lease Number 100  
Jicarilla Contract 100  
6. If Indian, All. or  
Tribe Name  
Jicarilla Apache  
7. Unit Agreement Name

8. Well Name & Number  
Jicarilla D 21

9. API Well No.  
30-039-30116

10. Field and Pool  
Blanco Mesaverde

11. County and State  
Rio Arriba, NM

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

Type of Submission

Type of Action

☐ Notice of Intent

☐ Abandonment

☐ Change of Plans

☒ Other - Spud Report

☒ Subsequent Report

☐ Recompletion

☐ New Construction

RCVD SEP 17 '09

☐ Final Abandonment

☐ Plugging

☐ Non-Routine Fracturing

OIL CONS. DIV.

☐ Casing Repair

☐ Water Shut off

DIST. 3

☐ Altering Casing

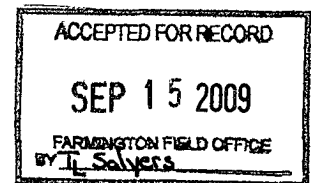
☐ Conversion to Injection

13. Describe Proposed or Completed Operations

09/09/2009 MIRU MOTE 212. Spud w/ 12 1/4" bit @ 13:15hrs on 9/9/09. Drilled ahead to 355'. Circ. hole & RIH w/ 11jts, 9 5/8", 32.3#, H-40 ST&C set @ 350'. RU to cmt. Pre-flush w/ 10bbls FW. Pumped 101sx (163cf-29bbls) Type I-II cmt w/ 20% fly-ash. Drop plug & displaced w/ 24bbls FW. Bump plug. Circ. 2bbls cmt to surface. RD cmt. WOC. ND BOPE. ✓

PT will be conducted by Drilling Rig. Results will appear on next report. ✓

APD/ROW



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

Signed *Crystal Tafoya* Crystal Tafoya

Title Regulatory Technician

Date 09/14/2009

(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.

NMOCD

*TS*

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