

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT" - for such proposals.

FORM APPROVED

Budget Bureau No. 10040135

Expires: March 31, 1993

RECEIVED

OCT 28 2009

Bureau of Land Management

Farmington Field Office

1. Type of Well:

Gas

5. Lease Number:

SF-078738

2. Name of Operator:

ConocoPhillips

6. If Indian, allottee or Tribe Name:

3. Address and Phone No. of Operator:

P. O. Box 4289, Farmington, NM 87499
(505) 326-9700

7. Unit Agreement Name:

NMNM-7849A-MV

8. Well Name and Number:

NMNM-7849B-DK

SAN JUAN 30-5 UNIT 94M

4. Location of Well, Footage, Sec. T, R, U:

FOOTAGE: 740' FNL & 1565' FEL

S: 27 T: 030N R: 005W U: B

9. API Well No.

3003930751

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

<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Recompletion	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Non-Routine Fracturing
<input type="checkbox"/> Abandonment	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Water Shut Off
<input type="checkbox"/>	<input checked="" type="checkbox"/> Other-First Delivery	<input type="checkbox"/> Conversion to Injection

13. Describe Proposed or Completed Operations

This well was first delivered on 10/15/2009 and produced natural gas and entrained hydrocarbons.

Notes: THIS WELL WAS DELIVERED THROUGH THE GAS RECOVERY COMPLETION. STARTED SELLING ON THE MV 10/15/09, MV & DK FLOWING TOGETHER ON 10/20/09. FINISHED THE GAS RECOVERY COMPLETION 10/27/09.

TP: CP: Initial MCF: 14542

Meter No.: 83280

Gas Co.: WFS

Proj Type.: GAS RECOVERY COMPLETION

RCVD NOV 9 '09

OIL CONS. DIV.

DIST. 3

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

Signed

Tamra Sessions

Title: Staff Regulatory Tech.

Date: 10/28/2009

(This Space for Federal or State Office Use)

APPROVED BY:

Title:

ACCEPTED FOR RECORD

CONDITION OF APPROVAL, if any:

OCT 30 2009

NMCCD

FARMINGTON FIELD OFFICE
BY: *cm*