UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED

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

MAR 15 2011

Budget Bureau No. 1004-0135

Expires: March 31, 1993

Farmington Field Office Bureau of Land Management

,		
1. Type of Well:	er start generale en	5. Lease Number:
Gas		SF-078835-A
2. Name of Operator:		6. If Indian, allottee or Tribe Name:
ConocoPhillips		
	· · · · · · · · · · · · · · · · · · ·	7. Unit Agreement Name:
3. Address and Phone No. of Operator:		NMNM-784/3A-MV
P. O. Box 4289, Farmington, NM 87499 (505) 326-9700		8. Well Name and Number: SAN JUAN 28-7 UNIT 85
		
4. Location of Well, Footage, Sec. T, R, U:		9. API Well No.
FOOTAGE: 856' FNL & 1090' FEL		3003907212
S : 06 T : 027N R : 007W U :	Α	10. Field and Pool:
		MV - BLANCO::MESAVERDE
		11. County and State:
		RIO ARRIBA, NM
	ah 17 majahagan ya 180 dingan awa 1856 di din diga Artista - didapa Artista Artista (an angaya ya masa an anga	
12. CHECK APPROPRIATE BOX TO INDICATE N	IATURE OF NOTICE, REPO	RT, 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
7	C Other- Re-Delivery	Conversion to Injection
13. Describe Proposed or Completed Operation This well was re-delivered on 2/18/2011 and Notes: THIS WELL WAS SHUT IN MOR	produced natural gas and en	trained hydrocarbons. NEW DRILL SAN JUAN 28-7 UNIT 236P
TP: 601 CP: 601 Meter No.: 72298 Gas Co.: ENT Proj Type.: REDELIVERY	Initial MCF: 567	1001 Tools Date: 2114/2014
14. I Hereby certify that the foregoing is true and correct.		
Signed James Sessions	Title: Staff Regula	atory Tech. Date: 3/14/2011
his Space for Federal or State Office Use)		ACCEPTED FOR RECUMD
APPROVED BY:	Title:	Date: MAR 1 6 2011
CONDITION OF APPROVAL, if any:		FARMINGTON FILLU OFFICE BY