

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

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

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ALBUQUERQUE, N.M.

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. CONT 145
2. Name of Operator CONOCO INC.	6. If Indian, Allottee or Tribe Name Jicarilla
3. Address and Telephone 10 DESTA DRIVE, SUITE 430E, MIDLAND, TEXAS 79705-4500	7. If unit or CA, Agreement Designation Jicarilla K
4. Location of Well (Footage, Sec., T. R. M. or Survey Description) 1450' FSL & 940' FWL Sec. 11, T25N, R5W	8. Well Name and No. 13E
	9. API Well No. 30-039-25907
	10. Field and Pool, or Exploratory Area Blanco MV/Basin Dakota
	11. County or Parish, State Rio Arriba, New Mexico

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent <input type="checkbox"/> Subsequent Report <input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Abandonment <input type="checkbox"/> Recompletion <input type="checkbox"/> Plugging Back <input type="checkbox"/> Casing Repair <input type="checkbox"/> Altering Casing <input checked="" type="checkbox"/> Other <u>Extension of time</u> <input type="checkbox"/> Change of Plans <input type="checkbox"/> New Construction <input type="checkbox"/> Non-Routine Fracturing <input type="checkbox"/> Water Shut-Off <input type="checkbox"/> Conversion to Injection <input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well)

Completion or Recompletion Report and Log form)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.

This is a request to extend the approved APD for another 12 month period.

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OIL CON. DIR.
BUREAU

14. I hereby certify that the foregoing is true and correct Signed <u>DeAnn Johnson</u> Title <u>Sr. Property Analyst</u> Date <u>04/30/99</u>
15. (This space for Federal or State office use) Approved by <u>Patricia M. Hester</u> Title <u>Lands and Mineral Resources</u> Date <u>5-5-99</u> Conditions of approval if any:

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 or representations as to any matter within its jurisdiction.

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