

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

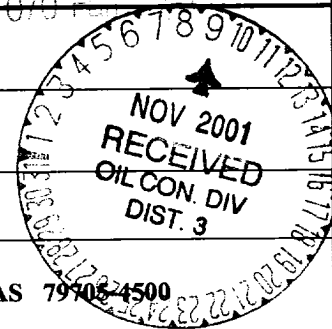
RECEIVED

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reenter a different reservoir.
Use "APPLICATION FOR PERMIT—" For such proposals

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. NM-03521
2. Name of Operator CONOCO INC.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone 10 DESTA DRIVE, SUITE 100W, MIDLAND, TEXAS 79705-4500	7. If unit or CA, Agreement Designation SAN JUAN 28-7 UNIT
4. Location of Well (Footage, Sec., T. R. M. or Survey Description) Section 17, T27N, R7W 1060' FSL & 890' FWL	8. Well Name and No. #297
	9. API Well No. 20 031 24786
	10. Field and Pool, or Exploratory Area Blanco PC South/Basin FC
	11. County or Parish, State Rio Arriba County, NM



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"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>Add DHC Order</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 well will be downhole commingled pursuant to the terms and conditions outlined in Order R-11363

No DHC order - 11-20-1

14. I hereby certify that the foregoing is true and correct		
Signed <u>Wickie K. Westby</u>	Title <u>Sr. Title Analyst</u>	Date <u>9-19-01</u>
15. (This space for Federal or State office use)		
Approved by <u>[Signature]</u>	Title <u>Per. Dir.</u>	Date <u>11/5/01</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.		

NMOCD