

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No 1004-0135
Expires July 31, 1996

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No.

SF 078497A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No

8. Well Name and No.

SAN JUAN 28-7 #30

9. API Well No.

30-039-07411

10. Field and Pool, or Exploratory Area

PICTURED CLIFFS BLANCO MESAVE

11. County or Parish, State

RIO ARRIBA

NM

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

CONOCO, INC.

3a. Address

P.O. BOX 2197 HOUSTON, TX 77252

3b. Phone No. (include area code)

(281)293-1005

4. Location of Well (Footage Sec. T, R, M, or Survey Description)

1850' FSL & 990' FWL
L, SEC. T28N, R7W

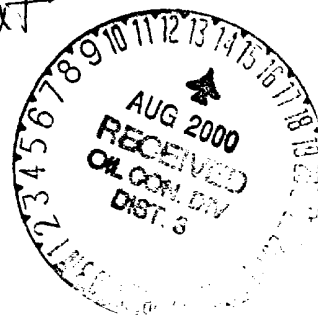
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/ Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleate horizontally, give subsurface locations measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleation in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

CONOCO Inc., proposes to recompleate this well to the Blanco Pictured Cliffs. ext

SH
OCD Needs plat for Blanco PC. ext OK 8-16-00
SH



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

Name (Printed/Typed)

DEBORAH MARBERRY

Title

REGULATORY ANALYST

Signature

Date

06/20/2000

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

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.

**San Juan 28-7 Unit #30
Pictured Cliffs Recompletion
and Commingle with Mesa Verde,
June 19, 2000**

API# 300390741100, Location: T-28N, R-7W, Sec.-18, Qtr.-SE NW SW

PROCEDURE

- 1) Move in workover rig, hold safety meeting, note prevailing wind direction at location, designate muster point, review procedure, identify potential hazards, isolate lines and facilities, blow down lines, lock out tag out, spot equipment, rig up, WORK SAFELY!
- 2) Kill well (minimum fluid!!) down tubing and POOH standing back.
- 3) Rig up wireline, RIH set CIBP @ 4,000' in 7" casing (top MV open hole @ 5032').
- 4) Fill casing with water, test to 500 psi
- 5) Rig up WL and run Neutron / Gamma Ray Log to identify perforation intervals.
Contact Lisa Campbell 281-293-6527 Fax ext.-1102, continuous Fax ext.-6362.
- 6) Rig up wireline, perforate PC interval as per Lisa's instructions.
(Note: deep penetration charges, for going through 2 strings of csg) RD wireline.
- 7) Rig up BJ, bull head/break down with 15% HCl as per BJ's procedure.
- 8) Proceed with foam frac as per BJ procedure.
- 9) Flowback energized fluids until well dies or settles down, strip in hole 2-3/8" tubing string, clean out to bottom of PC interval. Land tubing mid perms, flow back and clean up until stabilized, obtain four hour stable rate test.
- 10) Pick up 3-3/4" bit , drill collars, and 2/38" work string, RIH and drill out CIBP @ 4,000', clean out to PBTD @ 5755', POOH, lay down drill collars and bit.
- 11) RIH 2.375" production tubing with mule shoe and SN on bottom, land tubing @ 5700' (caution this is in oprn holr) drop rabbit through tubing to check for tight spots, be careful not to over torque, Make drift run to SN with sand line before rigging down.
- 20) RDMO, Notify operator to put on plunger lift production.

San Juan East Team (DRW, CEM)

Cc: Well File, 3 Copies to Farmington Project Leads

District I
P.O. Box 1980, Hobbs, NM 88241-1980
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised October 18, 1994
Instruction on back
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-039-07411	² Pool Code 72359	³ Pool Name PICTURED CLIFFS
⁴ Property Code 016608	⁵ Property Name SAN JUAN 28-7 #30	⁶ Well Number 30
⁷ OGRID No. 005073	⁸ Operator Name CONOCO, INC.	⁹ Elevation

¹⁰ Surface Location

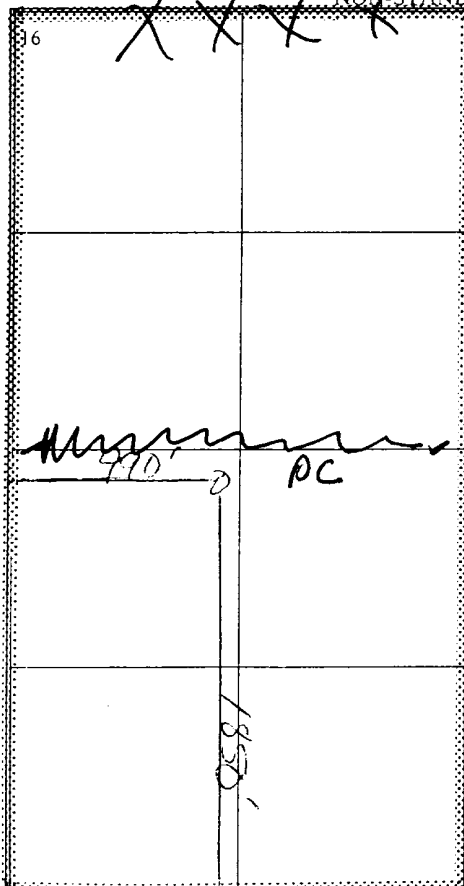
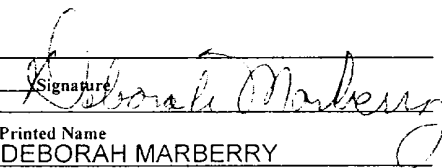
UL or lot no. L	Section 18	Township 28N	Range 7W	Lot Idn	Feet from the 1850'	North/South line SOUTH	Feet from the 990'	East/West line WEST	County RIO ARRIBA
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¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
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¹² Dedicated Acres 160.15	¹³ Joint or Infill I	¹⁴ Consolidation Code U	¹⁵ Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

¹⁶ 	¹⁷ OPERATOR CERTIFICATION <i>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief</i> Signature:  Printed Name: DEBORAH MARBERRY Title: REGULATORY ANALYST Date: 06/21/2000	
	¹⁸ SURVEYOR CERTIFICATION <i>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under</i> Date of Survey: Signature and Seal of Professional Surveyer: Certificate Number:	

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PO Box 1980, Hobbs, NM 88241-1980
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811 South First, Artesia, NM 88210
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☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-039-07411		² Pool Code 72319		³ Pool Name Blanco Mesaverde	
⁴ Property Code 016608		⁵ Property Name SAN JUAN 28-7 #30			⁶ Well Number 30
⁷ OGRID No. 005073		⁸ Operator Name CONOCO, INC.			⁹ Elevation

¹⁰ Surface Location

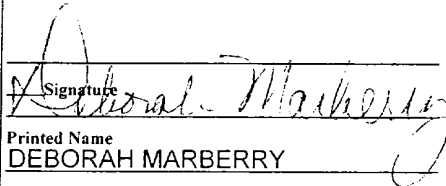
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
L	18	28N	7W		1850'	SOUTH	990'	WEST	RIO ARRIBA

¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
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¹² Dedicated Acres 820.36 10000	¹³ Joint or Infill I	¹⁴ Consolidation Code U	¹⁵ Order No.
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¹⁶				¹⁷ OPERATOR CERTIFICATION <i>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief</i>  _____ Printed Name DEBORAH MARBERRY _____ Title REGULATORY ANALYST _____ Date 06/21/2000 ¹⁸ SURVEYOR CERTIFICATION <i>I hereby certify that the well location shown on this plot was plotted from field notes of actual surveys made by me or under</i> _____ Date of Survey Signature and Seal of Professional Surveyer _____ Certificate Number