

District I - (505) 393-6161
1625 N. French Dr.
Hobbs, NM 88240
District II - (505) 748-1283
811 S. First
Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Road
Aztec, NM 87413
District IV - (505) 827-7131
2040 S. Pacheco
Santa Fe, NM 87505

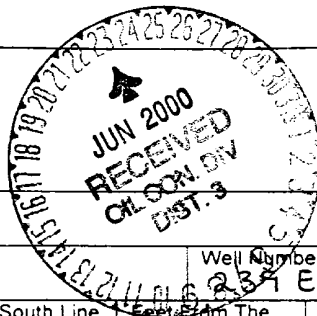
New Mexico
Energy Minerals and Natural Resources Department
Oil Conservation Division
2040 South Pacheco Street
Santa Fe, New Mexico 87505
(505) 827-7131

Form C-140
Revised 06/99

SUBMIT ORIGINAL
PLUS 2 COPIES
TO APPROPRIATE
DISTRICT OFFICE

APPLICATION FOR
WELL WORKOVER PROJECT

7115069 239 EFR
1160520



I. Operator and Well		OGRID Number						
Operator name & address Conoco Inc. P.O. Box 1267 Ponca City, OK 74604-1267		005073						
Contact Party Marti Johnson		Phone (580) 767-2451						
Property Name San Juan 28-7		Well Number 239 E	API Number 3003922362					
UL D	Section 17	Township 28N	Range 07W	Feet From The 1030	North/South Line NL	Feet From The 930	East/West Line WL	County Rio Arriba

II. Workover	
Date Workover Commenced: 7/8/99	Previous Producing Pool(s) (Prior to Workover):
Date Workover Completed: 7/12/99	

- III. Attach a description of the Workover Procedures performed to increase production.
- IV. Attach a production decline curve or table showing at least twelve months of production prior to the workover and at least three months of production following the workover reflecting a positive production increase.
- V. AFFIDAVIT:

State of Oklahoma)

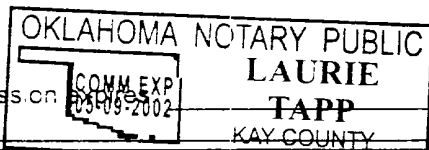
) ss.

County of Kay)

Marti Johnson, being first duly sworn, upon oath states:

- I am the Operator, or authorized representative of the Operator, of the above-referenced Well.
- I have made, or caused to be made, a diligent search of the production records reasonably available for this Well.
- To the best of my knowledge, this application and the data used to prepare the production curve and/or table for this Well are complete and accurate.

Signature [Signature] Title Coordinator, A & I M Date 6/12/00
SUBSCRIBED AND SWORN TO before me this 12th day of June, 2000



[Signature]
Notary Public

FOR OIL CONSERVATION DIVISION USE ONLY:

VI. CERTIFICATION OF APPROVAL:
This Application is hereby approved and the above-referenced well is designated a Well Workover Project and the Division hereby verifies the data shows a positive production increase. By copy hereof, the Division notifies the Secretary of the Taxation and Revenue Department of this Approval and certifies that this Well Workover Project was completed on 7/12/99

Signature District Supervisor 353 OCD District 3 Date 7/14/00

VII. DATE OF NOTIFICATION TO THE SECRETARY OF THE TAXATION AND REVENUE DEPARTMENT: _____

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

COPY RECEIVED

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		99 JUL 25 070 FARMINGTON, NM
SUBMIT IN TRIPLICATE		5. PLEASE DESIGNATION AND SERIAL NO. NMSF 078417
TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		6. ALLOTTEE OR TRIBE NAME
NAME OF OPERATOR CONOCO INC.		7. IF UNIT OR CA, AGREEMENT DESIGNATION San Juan 28-7 Unit
ADDRESS AND TELEPHONE NO. 10 Desta Drive, Suite 100W Midland, Texas 79705-4500 (915) 686-5424		8. WELL NAME AND NO. San Juan 28-7 Unit #239E
LOCATION OF WELL (Footage, Sec., T., R., M., or Survey Description) 1030' FNL & 930' FWL, UNIT LETTER "D", Sec. 17, T28N-R07W		9. API WELL NO. 30-039-22362
		10. FIELD AND POOL, OR EXPLORATORY AREA Basin Dakota
		11. COUNTY OR PARISH, STATE Rio Arriba County, NM

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

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.)

7/3/99 RIG up pulling unit, spot equipment. Blow well down: kill well with 30 bbls 1% KCL. RIH with one joint of 1.9" tbg. g up. POOH with 241 joints of 1.9" tbg. Lay down. Tag fill at 7718.0', 72' of fill, 19' of perms covered. Secure well SDFN

7/10/99 Blow well down, RIH with sand bailer, and 248 joints. Clean well out to PBTD. 7759.0'. POOH with tbg. and bailer. ean out sand from tbg. Shut down, weather turn bad.

7/12/99 Csg. press. 480# tbg. press 400# Blew well down, Kill well 30 bbls. 1% KCL. RIH with mule shoe collar, SN and 245 nts of 2 3/8" tbg. Land well at 7664.0'. NDBOP NUWH. RU swab, int. fluid level at 6000.0' made 9 swab runs well kick off. covered 25 bbls. of fluid. RD swab. RD rig.

I hereby certify that the foregoing is true and correct

SIGNED Verla Johnson
(This space for Federal or State office use)

TITLE VERLA JOHNSON, As Agent for Conoco Inc. DATE 7-20-99

APPROVED BY _____
Conditions of approval, if any

TITLE _____ DATE _____

Section 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 or fraudulent statements or representations as to any matter within its jurisdiction.

* See Instruction on Reverse Side

ACCEPTED FOR RECORD

AUG 12 1999

OPERATOR

FAIRHURST OFFICE
BY _____

New Mexico Well Workover Application - MCF History

Well Workover Date = 7/8/99

NM Tax Well Workover Gas Alloc Vols.rep

Lease Name, Producing	**Curr LWP Code	API Number	Pool Name	Tax ID Code	Tax Suffix	County Name	Sect.	TWN	Range
SAN JUAN 28-7	7115069239EFRR	3003922362	BASIN DAKOTA (GAS)	1160520	F3910	RIO ARRIBA	17	28N	7W

**Curr LWP Code	**Production Date (CCYYMM)	Gas - Prod MCF Monthly (GA)
7115069239EFRR	199807	535
	199808	544
	199809	657
	199810	564
	199811	765
	199812	732
	199901	705
	199902	628
	199903	787
	199904	1,114
	199905	903
	199906	754
	199907	4,430
	199908	5,776
	199909	3,532
	199910	2,838
7115069239EFRR		