UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

S9 MAY 24 PN 2:02

Tribe Name 7. Unit Agreement Name 8. Well Name & Number 8. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700 9. API Well No. 30-039-25748 1. Location of Well, Footage, Sec., T, R, M 2065'FSL, 2005'FEL, Sec.34, T-28-N, R-6-W, NMPM 10. Field and Pool Blanco MV/Basin DK 11. County and State Rio Arriba County, 1 2. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission X Notice of Intent Abandonment Recompletion Subsequent Report Plugging Back Non-Routine Fracturing Casing Repair Water Shut off Final Abandonment Z Other - Tubing Repair 3. Describe Proposed or Completed Operations It is intended to repair the tubing in the subject well according to the attached procedure.					
S. Lease Number SF-079051 Type of Well GAS Tribe Name 7. Unit Agreement Name San Juan 28-6 Unit RESOURCES OIL & GAS COMPANY Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700 Location of Well, Footage, Sec., T, R, M 2065'FSL, 2005'FEL, Sec.34, T-28-N, R-6-W, NMPM 10. Field and Pool Blance MV/Basin DK 11. County and State Rio Arriba County, 1 2. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission X Notice of Intent Abandonment Change of Plans Recompletion New Construction Plugging Back Non-Routine Fracturing Casing Repair Mater Shut off Final Abandonment Altering Casing Conversion to Injection X Other - Tubing Repair 3. Describe Proposed or Completed Operations It is intended to repair the tubing in the subject well according to the attached procedure. This space for Federal or State Office use) PEROVED BY N Duane W. Spancer Title Title **Spancer** **Title** **Spancer** **Title**	Sundry Not:	ices and Reports on Wel	.ls 070	FARLINGTON, NM	
SF-079051 GAS 6. If Indian, All. or Tribe Name 7. Unit Agreement Name San Juan 28-6 Unit RESOURCESN OIL & GAS COMPANY 8. Well Name & Number San Juan 28-6 Unit Address & Phone No. of Operator San Juan 28-6 Unit PO Box 4289, Farmington, NM 87499 (505) 326-9700 PO Box 4289, Farmington, NM 87499 (505) 326-9700 10. Field and Pool 2065'FSL, 2005'FEL, Sec.34, T-28-N, R-6-W, NMPM 11. County and State Ric Arriba County, 1 12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission X Notice of Intent Abandonment Change of Plans Recompletion New Construction Subsequent Report Plugging Back Non-Routine Fracturing Casing Repair Mater Shut off Casing Repair Mater Shut off Altering Casing Conversion to Injection X Other - Tubing Repair 3. Describe Proposed or Completed Operations It is intended to repair the tubing in the subject well according to the attached procedure. 4. I hereby certify that the foregoing is true and correct. Gigned Add According to the attached procedure. Title Shubara Material Regulatory Administrator Date 5/21/99 treestore the Proposed of Shubara Material Regulatory Administrator Date 5/21/99 treestore the Proposed of Shubara Material Regulatory Administrator Date 5/21/99 treestore the Proposed of Shubara Material Regulatory Administrator Date 5/21/99 treestore the Propose		•			
Tribe Name 7. Unit Agreement Name San Juan 28-6 Unit RESOURCES OIL & GAS COMPANY 8. Well Name & Number San Juan 28-6 Unit 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Juan 28-6 U #15: 8. Well Name & Number San Ju				SF-079051	
7. Unit Agreement Name San Juan 28-6 Unit RESOURCES OIL & GAS COMPANY 8. Well Name & Number San Juan 28-6 Unit PO BOX 4289, Farmington, NM 87499 (505) 326-9700 Location of Well, Footage, Sec., T, R, M Location of Well No. Location of No. Location of Well No. Location of No. Location of Well No. Location of	Type of Well		6.	If Indian, All. or	
Name of Operator RESOURCES OIL & GAS COMPANY 8. Well Name & Number San Juan 28-6 Units **Notice of Intent Abandonment Notice of Intent Abandonment Altering Casing Repair Water Shut off Final Abandonment To Injection Subsequent Report Pinal Abandonment To Injection It is intended to repair the tubing in the subject well according to the attached procedure. **Andrew San Juan 28-6 Unit				Tribe Name	
Name of Operator RESOURCES OIL & GAS COMPANY 8. Well Name & Number San Juan 28-6 Units **Notice of Intent Abandonment Notice of Intent Abandonment Altering Casing Repair Water Shut off Final Abandonment To Injection Subsequent Report Pinal Abandonment To Injection It is intended to repair the tubing in the subject well according to the attached procedure. **Andrew San Juan 28-6 Unit					
Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700 PO Box 4289, Farmington, NM 8019, Farmington, Nm 9740 PO Box 4289, Farmington, NM 8019, Farmington, Nm 9740 PO Box 4289, Farmington, N			7.	Unit Agreement Name	
8. Well Name & Number Address & Phone No. of Operator FO Box 4289, Farmington, NM 87499 (505) 326-9700 9. API Well No. 30-039-25748 10. Field and Pool 2065'FSL, 2005'FEL, Sec.34, T-28-N, R-6-W, NMPM 11. County and State Rio Arriba County, 1 2. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission X Notice of Intent Abandonment Recompletion Plugging Back Non-Routine Fracturing Casing Repair Water Shut off Altering Casing Conversion to Injection X Other - Tubing Repair 3. Describe Proposed or Completed Operations It is intended to repair the tubing in the subject well according to the attached procedure. At the repair that the foregoing is true and correct. Signed Address & Phone No. Of Operator Title Technology Administrator Date 5/21/99 Tre This space for Federal or State Office use) Title Technology Administrator Date 5/21/99 Title Technology Administrator Date 5/21/99 Tre The Proventing Title Technology Administrator Date 5/21/99 Tre This Space for Federal or State Office use) Title Technology Administrator Date 5/21/99 Title Technology Administrator Date 5/21/99 Tre This Space for Federal or State Office use) Title	2. Name of Operator			San Juan 28-6 Unit	
8. Well Name & Number Address & Phone No. of Operator FO Box 4289, Farmington, NM 87499 (505) 326-9700 9. API Well No. 30-039-25748 10. Field and Pool 2065'FSL, 2005'FEL, Sec.34, T-28-N, R-6-W, NMPM 11. County and State Rio Arriba County, 1 2. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission X Notice of Intent Abandonment Recompletion Plugging Back Non-Routine Fracturing Casing Repair Water Shut off Altering Casing Conversion to Injection X Other - Tubing Repair 3. Describe Proposed or Completed Operations It is intended to repair the tubing in the subject well according to the attached procedure. At the repair that the foregoing is true and correct. Signed Address & Phone No. Of Operator Title Technology Administrator Date 5/21/99 Tre This space for Federal or State Office use) Title Technology Administrator Date 5/21/99 Title Technology Administrator Date 5/21/99 Tre The Proventing Title Technology Administrator Date 5/21/99 Tre This Space for Federal or State Office use) Title Technology Administrator Date 5/21/99 Title Technology Administrator Date 5/21/99 Tre This Space for Federal or State Office use) Title	RURI INGTON				
8. Well Name & Number San Juan 28-6 U #15: PO Box 4289, Farmington, NM 87499 (505) 326-9700 9. API Well No. 30-039-25748 10. Field and Pool 2065'FSL, 2005'FEL, Sec.34, T-28-N, R-6-W, NMPM 10. Field and Pool Blanco MV/Basin DK 11. County and State Rio Arriba County, 1 2. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission Type of Action Abandonment Recompletion New Construction Subsequent Report Plugging Back Non-Routine Fracturing Altering Casing Repair Water Shut off Submission Altering Casing Conversion to Injection Altering Casing Repair Subsequent Report Altering Casing Conversion to Injection X Other - Tubing Repair 3. Describe Proposed or Completed Operations It is intended to repair the tubing in the subject well according to the attached procedure. Altering Casing Altering Casing Conversion to Injection Altering Casing Conversion to Injection Altering Casing Repair Title Regulatory Administrator Date 5/21/99 tro Title Regulatory Administrator Date 5/21/99 Title Regulatory Administrator Date 5/21/99 Title Regulatory Regulato	RESOURCES	E CAS COMPANY			
Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700 Describe Proposed or Completed Operations It is intended to repair the tubing in the subject well according to the attached procedure. Sagnet Water Market Name of Facture of Facture of Proposed By Money Proposed by Money Courty and State Carperover. Sagnet Water Administrator Date 5/21/99 Lication of Well, Footage, Sec., T. R. M. 10. Field and Pool Blanco MV/Basin DK 11. County and State Rio Arriba County, 1 County and State Rio Arriba County, 1 County and State Rio Arriba County, 1 Abandonment Change of Plans Recompletion New Construction New Construction New Construction New Construction New Construction Non-Routine Fracturing Water Shut off Conversion to Injection X Other - Tubing Repair 3. Describe Proposed or Completed Operations It is intended to repair the tubing in the subject well according to the attached procedure. At I hereby certify that the foregoing is true and correct. Carperoved By Money State Office use) Expersive By Duane W. Spencer Title	OIL	a GAD COMPANI	Ω	Well Name & Number	
PO Box 4289, Farmington, NM 87499 (505) 326-9700 1. Location of Well, Footage, Sec., T, R, M 2065'FSL, 2005'FEL, Sec.34, T-28-N, R-6-W, NMPM 10. Field and Pool Blanco MV/Basin DK 11. County and State Rio Arriba County, 1 2. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission X. Notice of Intent Abandonment Subsequent Report Plugging Back Non-Routine Fracturing Casing Repair Water Shut off Altering Casing Repair 3. Describe Proposed or Completed Operations It is intended to repair the tubing in the subject well according to the attached procedure. 14. I hereby certify that the foregoing is true and correct. 15. Signed Mark Marker Fields of Federal or State Office use) 16. This space for Federal or State Office use) 17. Notice of Intent Abandonment A Data County and State Rio Arriba County, 1 18. County and State Rio Arriba County, 1 19. API Well No. 30-039-25748 10. Field and Pool Blanco MV/Basin DK 11. County and State Rio Arriba County, 1 10. Field and Pool Blanco MV/Basin DK 11. County and State Rio Arriba County, 1 10. County and State Rio Arriba County, 1 11. County and State Rio Arriba County, 1 11. County and State Rio Arriba County, 1 12. CHECK APPROPED BY Abandom State Rio Arriba County, 1 13. Describe Froposed or Completed Operations 14. I hereby certify that the foregoing is true and correct. 15. Signed Abandom State Office use) 16. Signed Abandom State Office use) 17. Field and Pool Blanco MV/Basin DK 11. County and State Rio Arriba County, 1 10. County and State Rio Arriba County, 1 11. County and State Rio Arriba County, 1 12. CHECK APPROPED State Rio Arriba County, 1 13. Describe Froposed or Completed Operation Recomplete Rio Arriba County and State Rio Arriba County, 1 14. I hereby certify that the foregoing is true and correct. 15. Signed Abandom State Rio Arriba County and State Rio Arriba C	3 Address & Phone No. of Operator				
. Location of Well, Footage, Sec., T, R, M 2065'FSL, 2005'FEL, Sec.34, T-28-N, R-6-W, NMPM 10. Field and Pool Blanco MV/Basin DK 11. County and State Rio Arriba County, 1 2. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission X. Notice of Intent Abandonment Change of Plans Recompletion New Construction Plugging Back Non-Routine Fracturing Casing Repair Water Shut off Final Abandonment Altering Casing Conversion to Injection X. Other - Tubing Repair 3. Describe Proposed or Completed Operations It is intended to repair the tubing in the subject well according to the attached procedure. 4. I hereby certify that the foregoing is true and correct. Signed Alter State Office use) Title Techson Foregoing to the Sylven Maragement Title Techson Foregoing to the Sylven Maragement Title Techson Foregoing to the Sylven Maragement Title	PO Box 4289, Farmington, NM 87499 (505) 326-9700		9		
10. Field and Pool 2065'FSL, 2005'FEL, Sec.34, T-28-N, R-6-W, NMPM 2065'FSL, 2005'FEL, Sec.34, T-28-N, R-6-W, NMPM 21. County and State Rio Arriba County, 1 2. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission X Notice of Intent Abandonment Recompletion Subsequent Report Plugging Back Non-Routine Fracturing Casing Repair Water Shut off Final Abandonment Altering Casing Conversion to Injection X Other - Tubing Repair 3. Describe Proposed or Completed Operations It is intended to repair the tubing in the subject well according to the attached procedure. 4. I hereby certify that the foregoing is true and correct. Signed Alter fitte Regulatory Administrator Date 5/21/99 tro This space for Federal or State Office use) FEGGLAGO, Parabout Marage-parte			٠.		
2065'FSL, 2005'FEL, Sec.34, T-28-N, R-6-W, NMPM 11. County and State Rio Arriba County, 1 2. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission Type of Action X. Notice of Intent Abandonment Recompletion Plugging Back Non-Routine Fracturing Casing Repair Attering Casing Conversion to Injection X. Other - Tubing Repair 3. Describe Proposed or Completed Operations It is intended to repair the tubing in the subject well according to the attached procedure. 14. I hereby certify that the foregoing is true and correct. 15. Signed According to the attached procedure. 16. Thereby certify that the foregoing is true and correct. 16. Signed According to the attached procedure. 17. Thereby certify that the foregoing is true and correct. 18. Signed According to the attached procedure. 18. Thereby certify that the foregoing is true and correct. 18. Signed According to the attached procedure. 18. Thereby certify that the foregoing is true and correct. 18. Signed According to the attached procedure. 19. Thereby certify that the foregoing is true and correct. 19. Thereby certify that the foregoing is true and correct. 19. Thereby certify that the foregoing is true and correct. 19. Thereby certify that the foregoing is true and correct. 19. Thereby certify that the foregoing is true and correct. 19. Thereby certify that the foregoing is true and correct. 19. Thereby certify that the foregoing is true and correct.			- 10.		
2. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission Type of Action X Notice of Intent Abandonment Change of Plans Recompletion New Construction Subsequent Report Plugging Back Non-Routine Fracturing Casing Repair Water Shut off Altering Casing Conversion to Injection X Other - Tubing Repair 3. Describe Proposed or Completed Operations It is intended to repair the tubing in the subject well according to the attached procedure. 4. I hereby certify that the foregoing is true and correct. Signed May Malance fittle Regulatory Administrator Date 5/21/99 tro This space for Federal or State Office use) Technology Firebout Management Title			22.		
2. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission Type of Action X Notice of Intent Abandonment Change of Plans Recompletion New Construction Subsequent Report Plugging Back Non-Routine Fracturing Casing Repair Water Shut off Final Abandonment Altering Casing Conversion to Injection X Other - Tubing Repair 3. Describe Proposed or Completed Operations It is intended to repair the tubing in the subject well according to the attached procedure. 4. I hereby certify that the foregoing is true and correct. Signed May Make Citle Regulatory Administrator Date 5/21/99 tro This space for Federal or State Office use) Expressed Frontier Fracturing Title Technology Product State Office use)	·	•	11.		
Type of Submission X Notice of Intent Abandonment Recompletion New Construction New Constr		·		Rio Arriba County, N	
Type of Submission X Notice of Intent Abandonment Recompletion New Construction New Constr				_	
Abandonment Change of Plans Recompletion New Construction Plugging Back Non-Routine Fracturing Casing Repair Water Shut off Final Abandonment Altering Casing Conversion to Injection X Other - Tubing Repair 3. Describe Proposed or Completed Operations It is intended to repair the tubing in the subject well according to the attached procedure. 4. I hereby certify that the foregoing is true and correct. Signed Altering Casing Conversion to Injection to Injection attached procedure.				DATA	
Recompletion New Construction Subsequent Report Plugging Back Non-Routine Fracturing Casing Repair Water Shut off Final Abandonment Altering Casing Conversion to Injection X Other - Tubing Repair 3. Describe Proposed or Completed Operations It is intended to repair the tubing in the subject well according to the attached procedure. 4. I hereby certify that the foregoing is true and correct. Signed May May Spencer Title Recompletion New Construction Page 8 Abandon Procedure Subject Water State Office use) Title Technology Page 100 Title				ans	
Subsequent Report	_n_ Notice of Intent	 '' '' ' -			
Casing Repair Water Shut off Altering Casing Conversion to Injection X Other - Tubing Repair 3. Describe Proposed or Completed Operations It is intended to repair the tubing in the subject well according to the attached procedure. 4. I hereby certify that the foregoing is true and correct. Signed Man Chitle Regulatory Administrator Date 5/21/99 tro [This space for Federal or State Office use] APPROVED BY Sydnam W. Spencer Title	Subsequent Report				
Altering Casing Conversion to Injection					
A. I hereby certify that the foregoing is true and correct. Signed May May Acceptible Regulatory Administrator Date 5/21/99 tro This space for Federal or State Office use) APPROVED BY Spancer Title	Final Abandonment				
It is intended to repair the tubing in the subject well according to the attached procedure. 1. I hereby certify that the foregoing is true and correct. 1. Signed And And Citle Regulatory Administrator Date 5/21/99 Chis space for Federal or State Office use) Term Lead Correct				2	
It is intended to repair the tubing in the subject well according to the attached procedure. 4. I hereby certify that the foregoing is true and correct. Signed Analysis (Fittle Regulatory Administrator Date 5/21/99 tro (This space for Federal or State Office use) APPROVED BY Spencer Title					
I hereby certify that the foregoing is true and correct. Signed August State Office use) APPROVED BY Spencer Title	13. Describe Proposed or Comp	leted Operations			
I hereby certify that the foregoing is true and correct. Signed August State Office use) APPROVED BY Spencer Title					
A. I hereby certify that the foregoing is true and correct. Signed Land Marcher Citle Regulatory Administrator Date 5/21/99 tro (This space for Federal or State Office use) APPROVED BY Sydney Spencer Title	It is intended to repair	the tubing in the subje	ect well accordi	ng to the attached	
Signed August Mark Accordittle Regulatory Administrator Date 5/21/99	procedure.				
Signed August Mark Accordittle Regulatory Administrator Date 5/21/99					
Signed August Mark Accordittle Regulatory Administrator Date 5/21/99					
Signed August Mark Accordittle Regulatory Administrator Date 5/21/99					
Signed August Mark Accordittle Regulatory Administrator Date 5/21/99		•			
Signed August Mark Accordittle Regulatory Administrator Date 5/21/99					
Signed August Mark Accordittle Regulatory Administrator Date 5/21/99					
Signed August Mark Accordittle Regulatory Administrator Date 5/21/99					
Signed August Mark Accordittle Regulatory Administrator Date 5/21/99					
Signed August Mark Accordittle Regulatory Administrator Date 5/21/99					
(This space for Federal or State Office use) APPROVED BY	14. I hereby certify that the	foregoing is true and	correct.		
(This space for Federal or State Office use) APPROVED BY	note Share	<i>a</i>			
(This space for Federal or State Office use) APPROVED BY	Signed Wydy William Me	CCC Title Regulatory	Administrator D	ate 5/21/99	
				rc	
	(This space for Federal or Stat	e Office use)	Whiteen Menonamen	15.3	
		Title	Date	1.1.	

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 28-6 Unit #151M Blanco Mesaverde/Basin Dakota Unit J, Sec. 34, T-28-N, R-6-W

Latitude / Longitude: 36°36.9525' / 107°27.10692' Recommended Tubing Repair Procedure 5/11/99

Project Justification: This well was completed in 1997 as a commingled producer in the Mesaverde and Dakota formations. Between January 1999 and February 1999, production dropped 112 mcf/d from the Dakota. and 148 mcf/d from the Mesaverde. Production fell again into March and continues to decline rapidly. Using slickline in 3/99, sandfill was discovered 40' above the bottom perforation. Although recovering the piston and bumper spring in 3/99 proved easy, the bumper spring could not be recovered when slickline tools were again run in the well in 4/99. Because sand was found on the slickline tools, it is believed that the bumper spring is stuck in sandfill. The lease operator also suspects sand bridges in the tubing/casing annulus.

NOTE: ALL DEPTHS ARE MEASURED FROM KB. KB to GL was 12'.

- Comply with all NMOCD, BLM and Burlington safety and environmental regulations. Prior to moving in 1. rig, make one-call and then verify rig anchors and dig pit.
- MIRU workover rig. NU relief line and blow well down (kill with 2% KCL water only if necessary). ND 2. WH and NU BOP. Test and record operation of BOP rams. Replace any WH valves that do not operate properly. Test secondary seal and install or replace if necessary.
- NOTE: This well produces with a plunger lift system. 2-3/8", 4.7#, J-55 tubing set at 7823' (F-nipple 3. set at 7792'). Broach tubing and set tubing plug in tubing as deep as possible to prevent the piston from surfacing. Release donut, pick up additional joints of tubing and tag bottom, recording the depth. PBTD should be at +/- 7895'. TOOH and stand back 2-3/8" tubing. Visually inspect tubing for corrosion, and replace any bad joints. Check tubing for scale and notify Operations Engineer and Drilling Superintendent if it is present.
- TIH with 3-7/8" bit, bit sub, and watermelon mill on 2-3/8" tubing and round trip to PBTD, cleaning out 4. with air/mist. NOTE: When using air/mist, mist rate must not be less than 12 bph. Speak with Operations Engineer and Drilling Superintendent, and if necessary, determine the best way to remove scale from the casing and perforations.
- TIH with one 4' pup-joint of 2-3/8" tubing with expendable check, F-nipple (above 4' pup joint), then ½ of 5. the 2-3/8" production tubing. Run a broach on sandline to insure that the tubing is clear. TIH with remaining 2-3/8" tubing. Replace any bad joints. CO to PBTD with air/mist.
- PU above the top Mesaverde perforation at 4993' and flow the well naturally, making short trips for 6. Discuss sand production with Operations Engineer and Drilling clean-up when necessary. Superintendent to determine when clean-up is sufficient.
- 7. Land tubing at 7836'. Obtain pitot gauge from casing and report this gauge. Broach the upper ½ of the production tubing. ND BOP and NU WH. Pump off expendable check. Connect to casing and circulate air to assure that expendable check has pumped off. If well will not flow on its own, make swab run to SN. RD and MOL. Return well to production.

Recommended: J. Im Jovel Approved: Boya 5-19-99
Operations Engineer 5/R/99 Drilling Superintendent

Operations Engineer: L. Tom Loveland

Office 326-9771

Pager 324-2568

Home 564-4418