

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

COPY

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

SUNDRY NOTICES AND REPORTS ON WELLS		5. LEASE DESIGNATION AND SERIAL NO.
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		SF 078496-A
SUBMIT IN TRIPLICATE		6. IF INDIAN, ALLOTTEE OR TRIBE NAME NOV - 2 AM 10:37
1. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		7. IF UNIT OR CA, AGREEMENT DESIGNATION San Juan 28-7 Unit
2. NAME OF OPERATOR CONOCO INC.		8. WELL NAME AND NO. San Juan 28-7 Unit ZZ5E
3. ADDRESS AND TELEPHONE NO. P.O. Box 2197, DU 3066, Houston, TX 77252-2197 (281) 293-1613		9. API WELL NO. 30-039-26173
4. LOCATION OF WELL (Footage, Sec., T., R., M., or Survey Description) 1350' FSL & 2330' FEL, UNIT LETTER "J", Sec. 34, T28N-R7W		10. FIELD AND POOL, OR EXPLORATORY AREA Blanco MV/Basin DK
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		11. COUNTY OR PARISH, STATE Rio Arriba County, NM
TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent <input checked="" 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: Spud Report <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 <small>(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form.)</small>	
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.)  11-1-99 @ 8:00 am Spudded well.		
14. I hereby certify that the foregoing is true and correct  SIGNED <u>Verla Johnson</u> TITLE <u>VERLA JOHNSON, As Agent for Conoco Inc.</u> DATE <u>11-1-99</u> (This space for Federal or State office use)  APPROVED BY _____ TITLE _____ DATE _____ 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.		

\* See Instruction on Reverse Side

ACCEPTED FOR RECORD

NOV 05 1999

NMOCD

FARMINGTON FIELD OFFICE  
BY [Signature]