

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0135
Expires November 30, 2000

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.

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No.
2. Name of Operator CONOCO, INC.		6. If Indian, Allottee or Tribe Name
3a. Address P.O. BOX 2197 DU 3066 HOUSTON TX 77252	3b. Phone No. (include area code) (281)293-1005	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) J 22 28N 7W 1555' FSL & 1660' FEL		8. Well Name and No. SAN JUAN 28-7 #159E
		9. API Well No. -30-039-26633
		10. Field and Pool, or Exploratory Area BLANCO MESAVERDE / BASIN DAKO
		11. County or Parish, State Rio Arriba NM

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 type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>APD change</u>
	<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 recompleting 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 recompleting 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 requests to change our TD and casing from our original APD. Cementing and casing is attached.



14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) DEBORAH MARBERRY		Title REGULATORY ANALYST
Signature <i>Deborah Marberry</i>		Date 2/2/2001

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by <i>/s/ Jim Lovato</i>	Title	Date FEB
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.

(Instructions on reverse)

NMOCD



Well: San Juan 28-7 159E
County: Rio Arriba
Area: East 28-7
Rig: Key Rig 43

Company: Conoco, Inc.
Engineer: Mr. Ricky Joyce
Date: 26-Jan-01

Surface Casing:

	228	sx	Type III Cement + 2%bwoc Calcium Chloride + 0.25 lbs/sk Cello Flake + 59.2% H2O
Slurry Weight:	14.5	ppg	
Slurry Yield	1.41	cf/sk	
Amount of Mix Water	6.84	gps	
Pump Time	2:47		
Compressives			
8 hrs @ 80 F	800	psi	
24 hrs @ 80 F	2150	psi	
48 hrs @ 80 F	3625	psi	

Intermediate Casing:

Slurry 1	435	sx	Premium Lite Cement + 2% bwoc Calcium Chloride + 0.25 lbs/sc Cello Flake + 8% bwoc Bentonite + 115.5% H2O		
Slurry 2	73	sx	Type III Cement + 2% bwoc Calcium Chloride + 0.25 lbs/sk Cello Flake + 59.2% H2O		
Slurry 1			Slurry 2		
Slurry Weight:	12.1	ppg	Slurry Weight:	14.5	ppg
Slurry Yield	2.21	cf/sk	Slurry Yield	1.41	cf/sk
Amount of Mix Water	12.52	gps	Amount of Mix Water	6.84	gps
Pump Time	3:00		Pump Time	2:15	
Compressives			Compressives		
8 hrs @ 80 F		psi	8 hrs @ 80 F	800	psi
24 hrs @ 80 F	250	psi	24 hrs @ 80 F	2150	psi
48 hrs @ 80 F	525	psi	48 hrs @ 80 F	3625	psi

Production Casing:

	365	sx	Premium Lite High Strength + 0.25 lbs/sk Cello Flake + .2% bwoc CD-32 + 0.65% bwoc FL-62 + 105.4% H2O
Slurry Weight:	12.5	ppg	
Slurry Yield	2.12	cf/sk	
Amount of Mix Water	11.4	gps	
Pump Time	3:12		
Compressives			
8 hrs @ 140 F		psi	
24 hrs @ 140 F	1600	psi	
48 hrs @ 140 F	2000	psi	

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

FORM APPROVED
OMB NO. 1004-0136
Expires February 28, 1995

APPLICATION FOR PERMIT TO DRILL OR DEEPEN

5. LEASE DESIGNATION AND SERIAL NO.

SF 079289A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

San Juan 28-7

8. FARM OR LEASE NAME WELL NO.

#159E

9. API WELL NO.

10. FIELD AND POOL, OR WILDCAT

Blanco Mesaverde/ Basin Dakota

11. SEC., T., R., M., OR BLK.
AND SURVEY OR AREA

Sec. 22, T28N, R7W

12. COUNTY OR PARISH

Rio Arriba

13. STATE

NM

1a. TYPE OF WORK

DRILL ☒DEEPEN ☐

b. TYPE OF WELL

OIL WELL ☐GAS WELL ☒

OTHER

SINGLE ZONE ☐MULTIPLE ZONE ☒

2. NAME OF OPERATOR

Conoco Inc.

3. ADDRESS AND TELEPHONE NO.

10 Desta Drive, Suite 649W, Midland, TX 79705; 915/686-5515

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements*)

At surface

1555' FSL & 1660' FEL

At proposed prod. Zone

1555' FSL & 1660' FEL

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

15. DISTANCE FROM PROPOSED*

LOCATION TO NEAREST
PROPERTY OR LEASE LINE, FT.

(Also to nearest drlg. Unit line, if any)

16. DISTANCE FROM PROPOSED LOCATION*

TO NEAREST WELL, DRILLING, COMPLETED,
OR APPLIED FOR, ON THIS LEASE, FT.

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

6790'

6. NO. OF ACRES IN LEASE

320

17. NO. OF ACRES ASSIGNED
TO THIS WELL

320

20. ROTARY OR CABLE TOOLS

Rotary

22. APPROX. DATE WORK WILL START*

02/28/00

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	GRADE, SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT
12 1/2"	J-55; 9 5/8"	36#	488'	233 sxs, circ.
8 3/4"	J-55; 7"	20#	3703"	574 sxs, circ.
6 1/4"	J-55; 4 1/2"	10.5#	7888' 7966	TOC @ 3603', 338 sxs, circ.

It is proposed to drill a vertical wellbore to the Mesaverde/Dakota Pools. DHC application will be filed with the BLM and NMOCD. An NOS was filed 06/19/00. The well will be drilled and equipped according to the following additional attachments:

1. Well Location & Acreage Dedication Plat (C-102).
2. Proposed Well Plan Outline.
3. Cementing Plan.
4. Blowout Preventer Hookup.
5. Surface Use Plan
6. Production Facility Layout.

APD/ROW

This application includes ROW's for the well pad, access road, cathodic protection, and pipeline.

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen give data on present productive zone and proposed new productive zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measured and true vertical depths. Give blowout preventer program, if any.

SIGNED Kendrick Northall TITLE Analyst

DATE 12/28/00

(This space for Federal or State office Use)

PERMIT NO. _____

APPROVAL DATE _____

Application approval does not warrant or certify that the applicant holds legal or equitable title to these rights in the subject lease which would entitle the applicant to conduct operations thereon.

CONDITIONS OF APPROVAL, IF ANY:

APPROVED BY _____

TITLE _____

DATE _____

*See Instructions On Reverse Side

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