

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB NO. 1004-0135 Expires: November 30, 2000	
5. Lease Serial No. SF-078410-A	
6. If Indian, Allottee or Tribe Name	
7. If Unit or CA/Agreement, Name and/or No. San Juan 29-5 Unit	
8. Well Name and No. SJ 29-5 Unit #54	
9. API Well No. 30-039-20370	
10. Field and Pool, or Exploratory Area Basin Dakota	
11. County or Parish, State Rio Arriba, NM	

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		2. Name of Operator Phillips Petroleum Company	
3a. Address 5525 Highway 64, NBU 3004, Farmington, NM 87401		3b. Phone No. (include area code) 505-599-3454	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Unit N, 1180' FSL & 1740' FWL Section 31, T29N, R5W			

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 checked="" type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>and Add</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	<u>MV pay to existing</u>
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	<u>DK & commingle</u>

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 recompleat horizontally, give subsurface locations and 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 recompleat 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 final site is ready for final inspection.)

The subject well failed a Bradenhead Test and the test indicated communication between the intermediate and production casing and our plans are the following.

LO/TO location, MIRU, ND WH & NU BOP. Kill well with water. COOH w/tubing. RIH w/BP above DK perfs. Locate & isolate casing leak. If leak found, squeeze leak with cement. PT squeeze. COOH & perforate and stimulate the MV intervals. Clean out to BP. Drill out BP. Clean out to PBTD & run tubing and return well to production with the MV/DK commingled. The well would be commingled per DHC Order #1363. Work is scheduled to be started around the 1st of March, 2001.

A sundry detailing the Dakota forecast will be filed before actual commingling occurs.

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Patsy Clugston	Title Sr. Regulatory/Production Clerk
Date 2/15/01	

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by [Signature]	Title [Blank]	Date FEB 27 2001
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 [Blank]	

Title 18 U.S.C. Section 1001, and Title 43 U.S.C. Section 1212, 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.

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-10
Revised August 15, 200

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Submit to Appropriate District Office
State Lease - 4 Copie
Fee Lease - 3 Copie

☐ AMENDED REPOR

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-039-20370	² Pool Code 72319	³ Pool Name Blanco Mesaverde
⁴ Property Code 009256	⁵ Property Name San Juan 29-5 Unit	⁶ Well Number 54
⁷ OGRID No. 017654	⁸ Operator Name PHILLIPS PETROLEUM COMPANY	⁹ Elevation 6518'

¹⁰ Surface Location

UL or lot no. N	Section 31	Township 29N	Range 5W	Lot Idn	Feet from the 1180'	North/South line south	Feet from the 1740'	East/West line West	County Rio Arriba
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¹¹ Bottom Hole Location If Different From Surface

UL or lot no. N	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
¹² Dedicated Acres 318.95 W/2	¹³ Joint or Infill Y	¹⁴ Consolidation Code U	¹⁵ Order No.						

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

<div><p>16</p></div>	<div><p>¹⁷ OPERATOR CERTIFICATION</p><p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.</p><p><i>Patsy Clugston</i> Signature Patsy Clugston Printed Name</p><p>Sr., Regulatory/Proration Clerk Title 2-16-01 Date</p><p>¹⁸ SURVEYOR CERTIFICATION</p><p>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</p><p>4-14-71 Date of Survey</p><p>Signature and Seal of Professional Surveyor: See original signed by David O. Villem</p><p>1760 Certificate Number</p></div>
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