Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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

5. Lease Designation and Serial No.

NOTICES	AND	REPORTS	ON	WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

SUNDRY

6. If Indian, Allottee or Tribe Name

SEP 1 1 1997

SF-078278

Use "APPLICATION FOR				
SUBMIT	7. If Unit or CA, Agreement Designation			
1. Type of Well Oil X Gas Well Other 2. Name of Operator Phillips Petroleum Company 3. Address and Telephone No. 5525 Highway 64, NBU 3004, Fa	San Juan 29-6 Unit 8. Well Name and No. SJ 29-6 Unit 2A 9. API Well No. 30-039-21121 10. Field and Pool, or exploratory Area			
Unit F, 1545' FNL & 1810' FW Section 14, T29N, R6W	Blanco Mesaverde 11. County or Parish, State Rio Arriba, NM			
12. CHECK APPROPRIATE BOX(s	, OR OTHER DATA			
TYPE OF SUBMISSION	TYPE OF ACTION			
X Notice of Intent Subsequent Report Final Abandonment Notice	Abandonment Recompletion Plugging Back Casing Repair Altering Casing Other Add pay & stimulate	Change of Plans New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water (Note: Report results of nultiple completion on Well Completion or Recompletion Report and Log form.)		
MIRU. ND WH & NU BOPs. POOH wretrievable bridge plug.	u/production tubing. Isolate existing which the control of the con	ogs are run). Retrieve		
Flow test Lewis Shale.	010 FE			
A workover pit maybe required.	DECEIVED SEP 1 5 1997 OUL GOIN. DIV. DIST. 3	OTO FAMILION ON NI		
14. I hereby certify that the foregoing is true and correct Signed	Title Regulatory Assistant	Date 9-8-97		

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.

Title



Conditions of approval, if any:

(This space for Federal of Spending W. Spending: