

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.

5. Lease Serial No.

NM-012671

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

San Juan 29-6 Unit

8. Well Name and No.

SJ 29-6 Unit #82M

9. API Well No.

30-039-26462

10. Field and Pool, or Exploratory Area

Basin Dakota and
Blanco Mesaverde

11. County or Parish, State

Rio Arriba, NM

SUBMIT IN TRIPLICATE - Other Instructions on reverse side

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

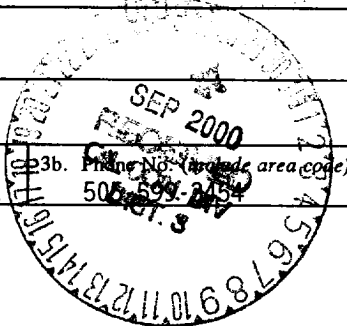
Phillips Petroleum Company

3a. Address

5525 Highway 64, NBU 3004, Farmington, NM 87401

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Unit 0, 10' FSL & 1440' FEL
Section 25, T29N, R6W



12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Fracture Treat | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other 4-1/2" |
| <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | casing report |
| <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 recomplete 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 recompletion 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.)

RIH w/6-1/4" bit & tagged cement @ 3770'. PT casing 3 min - 200 #; then 3000 # for 10 minutes. Good test. Drilled cement & shoe @ 3845'. Circ. hole. Drilled ahead to 7901'. TD reached 7/13/00. Circ. hole. RIH w/4-1/2" 11.6# I-80 casing and set @ 7901'. ECP set @ 5165' and DV tool set @ 5163'. RU to cement. Pumped 30 bbls fluid ahead of 1st stage Lead cement. Pumped 150 sx (320 cf - 56.99 bbl slurry) C1 H 35/65 POZ w/6% gel, 10#/sx CSE, 1/4#/sx Cello-flake, 5#/sx Gilsonite, 0.3% CD-32, 0.7% FL-52. Pumped tail - 50 sx (63 cf-11.2 bbls slurry) C1 H cement w/.3% FL-25, 1/4#/sx Cello-flake, 5#/sx Gilsonite, Displaced plug w/121 bbls. Bumped plug @ 2155 hrs 4/14/00 with 900#. ECP set w/2200#, dropped DV dart & opened DV tool w/950#.

2nd stage cement - 30 bbls fluid ahead, of Lead - Pumped 85 sx (164 cf-29.2 bbl slurry) 35/65 POZ Type III, w/6% gel, 3% KCl, 10#/sx Cello-flake, 5#/sx Gilsonite, 0.2% Static Free, 0.4% FL-25. Pumped tail - 50 sx (70 cf-12.45 bbl slurry) Type III cement w/1% CaCl2, 1/4#/sx Cello-flake. Displaced w/80 bbl. Bumped plug @ 2255 hrs 7/14/00. Circ. 5 bbls cement to surface. RD BJ. ND BOP & set slips, then cut off 4-1/2" casing. RD & released rig. 7/15/00. Waiting on completion rig to complete the Dakota interval. Will report casing PT & TOC details on the Dakota completion sundry.

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Patsy Clugston

Title

Sr. Regulatory/Proration Clerk

Date

7/20/00

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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

ACCEPTED

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 the Department of the Interior any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

NMOCD

BY [Signature] OFFICE