

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-039-25204
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E-347-39
7. Lease Name or Unit Agreement Name San Juan 31-6 Unit
8. Well No. 38E
9. Pool name or Wildcat BASIN FRUITLAND COAL

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	2. Name of Operator PHILLIPS PETROLEUM COMPANY
3. Address of Operator 5525 HWY 64 NBU 3004, FARMINGTON, NM 87401	4. Well Location Unit Letter B : 848 Feet From The North Line and 1843 Feet From The East Line Section 2 Township 30N Range 6W NMPM Rio Arriba County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 8100' GL	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

REQUEST 6 MONTH EXTENSION FOR THE APD FOR THE ABOVE NAMED WELL DUE TO THE FACT THAT DRILLING OPERATIONS HAVE NOT BEGUN.

RECEIVED
FEB 4 1993
OIL CON. DIV.
DIST. 3

Extension Expires 7-28-93

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE R. A. Allred TITLE Drilling Supervisor DATE 2-3-93
TYPE OR PRINT NAME R. A. Allred TELEPHONE NO. _____

(This space for State Use)

APPROVED BY Original Signed by FRANK T. CHAVEZ TITLE SUPervisor DISTRICT # 3 DATE FEB 4 1993
CONDITIONS OF APPROVAL, IF ANY: