## UNITED STATES

## DEPARTMENT OF THE INTERIOR



BUREAU OF LAND MANAGEMENT Sundry Notices and Reports on Wells 070 FALMINGIUN, NM 5. Lease Number SF-078207 1. Type of Well 6. If Indian, All. or Tribe Name GAS Unit Agreement Name 2. Name of Operator OIL & GAS COMPANY ONL COM. DIV. Well Name & Number DIST. 3 King #2 3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700 API Well No. 30-045-21049 10. Field and Pool 4. Location of Well, Footage, Sec., T, R, M 1645'FSL, 840'FEL, Sec.22, T-30-N, R-10-W, NMPM Blanco Pictured Cliffs 11. County and State San Juan Co, NM 12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Action Type of Submission \_ Abandonment \_\_\_ Change of Plans \_\_\_ Notice of Intent \_\_\_ New Construction \_\_ Recompletion \_\_\_ Non-Routine Fracturing X Subsequent Report \_\_\_ Plugging Back \_ Casing Repair Water Shut off \_\_ Altering Casing \_\_\_ Conversion to Injection Final Abandonment X Other - Restimulate 13. Describe Proposed or Completed Operations RU. PT csg to 3700 psi, OK. RD. 10-12-99 10-25-99 RU. PT lines to 5000 psi, OK. Frac PC w/403 bbl 35# lnr qel, 176,000# 20/40 AZ snd, 483,000 SCF N2. Flow back well. 10-26/29-99 Flow back well. Shut-in well. WO bailer. TIH w/bailer. Bail sand to 3035'. Flow well. 10-30-99 Flow back well. 10-31-99 Flow back well. Bail sand to 3029'. TOOH w/bailer. RD. Well turned over 11-1-99 to production. I hereby certify, that the foregoing is true and correct. Title Regulatory Administrator Date 11/3/99\_\_\_ Signe (This space for Federal or State Office use) APPROVED BY Title Date CONDITION OF APPROVAL, if any: