

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Budget Bureau No. 1004-0133
Expires August 31, 1985

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—" for such proposals.)

| | | |
|--|--|--|
| 1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER | | 5. LEASE DESIGNATION AND SERIAL NO NM-012641 |
| 2. NAME OF OPERATOR Phillips Petroleum Company | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 3. ADDRESS OF OPERATOR 300 W. Arrington, Suite 200, Farmington, NM 87401 | | 7. UNIT AGREEMENT NAME Blanco |
| 4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Unit M, 1085' FSL & 1643' FWL | | 8. FARM OR LEASE NAME |
| 14. PERMIT NO. 30-045-28305 | | 9. WELL NO. 204 |
| 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6235' GL | | 10. FIELD AND POOL, OR WILDCAT Basin Fruitland Coal |
| | | 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 26, T31N, R8W |
| | | 12. COUNTY OR PARISH San Juan |
| | | 13. STATE NM |

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
|--|---|---|--|
| TEST WATER SHUT-OFF <input type="checkbox"/> | PULL OR ALTER CASING <input type="checkbox"/> | WATER SHUT-OFF <input type="checkbox"/> | REPAIRING WELL <input type="checkbox"/> |
| FRACTURE TREAT <input type="checkbox"/> | MULTIPLE COMPLETE <input type="checkbox"/> | FRACTURE TREATMENT <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| SHOOT OR ACIDIZE <input type="checkbox"/> | ABANDON* <input type="checkbox"/> | SHOOTING OR ACIDIZING <input type="checkbox"/> | ABANDONMENT* <input type="checkbox"/> |
| REPAIR WELL <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | (Other) <u>Spud Notice</u> | |
| (Other) <input type="checkbox"/> | | (NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) | |

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

11-2-90

MIRU Aztec Well Service Rig No. 289. Spudded 12-1/4" hole @ 12:00 midnight. Ran 9-5/8", 36#, J-55, ST&C casing set @ 287'. RU DS and cemented w/250 Sx Class G cement w/3% CaCl₂ and 1/4# Flocele/Sk. Circ. 135 Sx cement. Plugged down @ 11:30 A.M. on 11-3-90. Bumped plug w/900 psi. WOC 9.5 hours. NU BOP and pressure tested to 1000 psi - okay.

RECEIVED
NOV 20 1990
OIL CON. DIV.
DIST. 3

18. I hereby certify that the foregoing is true and correct

SIGNED

R. A. Alfred

TITLE Drilling Supervisor

DATE 11-5-90

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD
DATE

NOV 15 1990

FARMINGTON RESOURCE AREA

BY

WT

*See Instructions on Reverse Side