| Form | 3160-5 |
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| (June | 1990) |

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

| FORM APPROVED | | | |
|-------------------|-----------|--|--|
| Budget Bureau No. | 1004-0135 | | |
| Expires: March 3 | 1 1903 | | |

| BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WELLS | | 5. Lease Designation and Serial No. |
|---|--|--|
| | | SF - 078996 |
| Do not use this form for proposals to drill | or to dopped or respirate a different | 6. If Indian, Allottee or Tribe Name |
| Lies "APPLICATION FOR | or to deepen or reentry to a different reservoir. | The Pane |
| USE_APPLICATION FOR | PERMIT - " for such proposals | |
| | IN TRIPLICATE | 7. If Unit or CA, Agreement Designation |
| 1. Type of Well Oil Y Gas | 23 MAT 1 8 1999 | San Juan 32-7 Unit |
| Well Other | | B. Well Name and No. |
| 2. Name of Operator Phillips Dottedloum Company | (5) (1) (5) (5) (5) (5) (6) (6) (6) (6) (6) (6) (6) (6) (6) (6 | ひら SJ 32-7 Unit #228 |
| Phillips Petroleum Company 3. Address and Telephone No. | DEST. I | 9. API Well No. |
| 5525 Highway 64, NBU 3004, Farmingt | NM 07401 505 500 000 | |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey De | ton, NM 87401 505-599-3454 | 10. Field and Pool, or exploratory Area |
| Unit G, 2628' FNL & 1436' FEL | Seription) | |
| Section 7, T31N, R7W | | Basin Fruitland Coal |
| , v o zn, nov | | 11. County or Parish, State |
| CUECK APPROPRIATE POW |) To 1100 | San Juan, NM |
| 12. CHECK APPROPRIATE BOX(s |) TO INDICATE NATURE OF NOTICE, REPORT | , OR OTHER DATA |
| TYPE OF SUBMISSION | TYPE OF ACTION | |
| X Notice of Intent | | |
| | Abandonment | Change of Plans |
| Subsequent Report | Recompletion | New Construction |
| | Plugging Back | Non-Routine Fracturing |
| Final Abandonment Notice | Casing Repair | Water Shut-Off |
| | Altering Casing | Conversion to Injection |
| | X Other Extend APD | Dispose Water |
| Describe Process I as Co. 14 4 Co. | pertinent details, and give pertinent dates, including estimated date of start | (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) |
| | cal depths for all markers and zones pertinent to this work.)* For 6 more months. Plans are to be drill the | |
| | The second second | 010 Table 20 FD 1 |
| 4. I hereby certify that the foregoing is the and correct | | 9 9 |
| (This space for Federal & state office use) | Title Regulatory Assistant | Date1/25/99 |
| Approved by Conditions of approval, if any: | Title A Any Town Lead | Date Date |

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.



* See Instruction on Reverse Side

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