

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB 1004-0135
Expires: November 30, 2000

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No.
NM-0546

6. If Indian, Allottee or Tribe Name
20 110 24 11 3: 53

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

8. Well Name And No.
MADDOX WN FEDERAL #6

9. API Well No.
30-045-30337

10. Field And Pool, Or Exploratory Area
BASIN FRUITLAND COAL

11. County Or Parish, State
SAN JUAN COUNTY, NM

SUBMIT IN TRIPLICATE - Other Instructions on reverse side

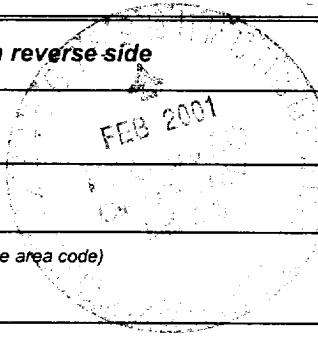
1. Type Of Well
Oil Well Gas Well Other

2. Name Of Operator
CONOCO INC.

3a. Address
**P.O. Box 2197, DU 3066,
Houston, TX 77252-2197**

3b. Phone No. (include area code)
(281) 293-1613

4. Location Of Well (Footage, Sec., T., R., M., or Survey Description)
1010' FSL - 1070' FWL, SEC. 24, T30N-R13W, UNIT LETTER 'M'



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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other: CASING REPORT
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplate horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which work will be performed or provide the Bond No. on file with the 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 site is ready for final inspection.)

01/07/01 Spudded well.

01/08/01 Ran 13 joints of 7" (20#, J-55) casing, set shoe at 564', hole size is 8-3/4". Cement with 120 sx (30bbls) of Type III cement w/ 2% CaCl, 0.25 pps Cello Flake. Displaced with 21 bbls freshwater, returned 20 bbls to surface. Bumped plug at 2:00 pm with 150# psi. Floats held.

01/10/01 Ran 50 joints of 4-1/2" (10.5#, J-55) casing, set shoe at 2095', hole size is 6-1/4". Cement with 180 sx 65:35 with 6% Gel, 7 pps CSE, 2% CD-32, 0.25 pps Cello Flake and 0.65% fl-32. Displaced with 32.7 bbls 2% KCl, returned 199 bbls flush to surface. Lost circ 15 bbls into displacement, reduced circ rate from 4 bpm to 1 bpm. Stroked casing slowly, regained circulation. Circulated 19 bbls of pre-flush to pit, but without cement. Had dye in last 2 bbls of pre-flush. Circulated approx. 1- 1-1/2 bbls of red-flush at plug bottom. Cement top estimated at 50'. Bumped plug with 1350# psi at 5:45 pm.

14. I hereby certify that the foregoing is true and correct
Name (Printed / Typed): **DEBRA SITTNER** Title **Agent for Conoco Inc.**

Signature *Debra Sittner* Date **01/22/01**

ACCEPTED FOR RECORD
FEB 07 2001
FARMINGTON FIELD OFFICE
BY *[Signature]*

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 _____

Section 1212, Title 43, Chapter 1001 and the provisions of Section 1212, make 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.