

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

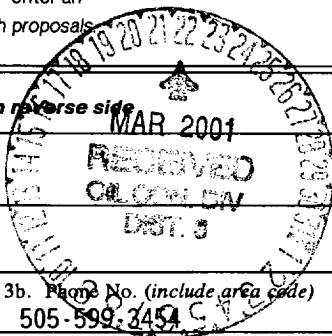
FORM APPROVED
OMB NO. 1004-0135
Expires: November 30, 2000

SUNDRY NOTICES AND REPORTS ON WELLS

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

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SUBMIT IN TRIPLICATE - Other instructions on reverse side



1. Type of Well

Oil Well Gas Well Other

2. Name of Operator

Phillips Petroleum Company

3a. Address

5525 Highway 64, NBU 3004, Farmington, NM 87401

3b. Phone No. (include area code)

505-599-3454

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

U-nit C, 958' FNL & 1759' FWL
Section 35, T31N, R8W

5. Lease Serial No.

NM-012641

6. If Indian, Allottee or Tribe Name

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

Blanco

8. Well Name and No.

Blanco #7A

9. API Well No.

30-045-30409

10. Field and Pool, or Exploratory Area

Blanco Mesaverde

11. County or Parish, State

San Juan, NM

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 <u>4-1/2" casing report</u>
	<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 Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with 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 final site is ready for final inspection.)

RIH w/8-3/4" bit & tagged cement @ 2680'. Drilled cement to stage tool @ 2689'. Drilled out stage tool & tagged cement @ 3325'. Drilled to 3380'. Drilled new formation to TD @ 5825'. TD reached 3/7/01. RIH w/4-1/2" 11.6# J-55 casing and set @ 5821' with ECP set @ 4953' - 4962', DV tool set @ 4951' - 4953'. RU to cement. Pumped 10 bbls water, 10 bbls gel water, & 10 bbls water w/red dye ahead of 1st Stage Lead - 45 sx (95 cf - 16.91 bbl slurry) 35/65 POZ Type 3 cement w/0.2#/sx Static free, 10#/sx CSE, 1/4#/sx cello-flake, 0.2% CD-32, 0.75% FL-52, 6% Bentonite. Tail-pumped 20 sx (28 cf - 5 bbl slurry) 35/65 POZ Type 3 cement w/0.02#/sx Static free, 10#/sx CSE, 1/4#/sx Cello-flake, 0.2% CD-32, 0.75% FL-52, 6% Bentonite. Dropped plug and displaced w/89 bbl water. Bumped plug w/600#. Inflated packer to 1800#. Wait 30 minutes.

Pumped 10 bbls water w/red dye ahead of 2nd Stage lead - 115 sx (275 cf - 48.97 bbl slurry) 35/65 POZ L Type 3 cement w/0.02#/sx Static free, 10#/sx CSE, 3% Potassium chloride, 1/4#/sx Cello-flake #/sx LCM-1, 0.4% FL-25, 6% Bentonite. Tail - 50 sx (73 cf - 13 bbl slurry) Type 3 cement w/1% CaCl2, 1/4#/sx Cello-flake. Dropped plug & displaced w/77 bbls water. Bumped plug to 760#. Held. Circ. 25 bbls water w/no red dye. WOC. ND BOP. Set slips and cut off 4-1/2" casing. RD & released rig 3/8/01. Will report casing pressure test and TOC on next report.

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Patsy Clugston

Title

Sr. Regulatory/Proration Clerk

Date

3/14/01

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date 9 2001

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

FIELD OFFICE

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