

State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

1. Operator Name and Address CONOCOPHILLIPS COMPANY PO BOX 2197 WL3 6106 HOUSTON , TX 77252		2. OGRID Number 217817
		3. API Number 30-039-29817
4. Property Code 31325	5. Property Name SAN JUAN 29 5 UNIT	6. Well No. 045A

7. Surface Location

UL - Lot I	Section 22	Township 29N	Range 05W	Lot Idn I	Feet From 2040	N/S Line S	Feet From 265	E/W Line E	County RIO ARRIBA
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8. Pool Information

BLANCO-MESAVERDE (PRORATED GAS)	72319
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Additional Well Information

9. Work Type New Well	10. Well Type GAS	11. Cable/Rotary	12. Lease Type Private	13. Ground Level Elevation 6813
14. Multiple N	15. Proposed Depth 6309	16. Formation Mesa Verde Group	17. Contractor	18. Spud Date
Depth to Ground water 55		Distance from nearest fresh water well > 1000		Distance to nearest surface water 522
Pit: Liner: Synthetic ☒ 12 _____ miles thick Clay ☐ Pit Volume: 4400 _____ bbls Drilling Method: Closed Loop System ☐ Fresh Water ☒ Brine ☐ Diesel/Oil-based ☐ Gas/Air ☐				

19. Proposed Casing and Cement Program

Type	Hole Size	Casing Type	Casing Weight/ft	Setting Depth	Sacks of Cement	Estimated TOC
Surf	12.25	9.625	32.3	235	141	0
Int1	8.75	7	20	4079	647	0
Prod	6.25	4.5	10.5	6309	253	3879

Casing/Cement Program: Additional Comments

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Proposed Blowout Prevention Program

Type	Working Pressure	Test Pressure	Manufacturer
DoubleRam	3000	3000	shafer

I hereby certify that the information given above is true and complete to the best of my knowledge and belief. I further certify that the drilling pit will be constructed according to NMOCD guidelines ☐ a general permit ☒ or an (attached) alternative OCD-approved plan ☐ .	OIL CONSERVATION DIVISION	
	Approved By: Charlie Perrin	
	Title: District Supervisor	
	Approved Date: 2/22/2006	Expiration Date: 2/22/2007
	Printed Name: Electronically filed by Yolanda Perez	
Title: Sr. Regulatory Analyst		
Email Address: yolanda.perez@conocophillips.com		
Date: 2/17/2006 Phone: 832-486-2329		

District I
 1625 N. French Dr., Hobbs, NM 88240
 Phone:(505) 393-6161 Fax:(505) 393-0720

District II
 1301 W. Grand Ave., Artesia, NM 88210
 Phone:(505) 748-1283 Fax:(505) 748-9720

District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 Phone:(505) 334-6178 Fax:(505) 334-6170

District IV
 1220 S. St Francis Dr., Santa Fe, NM 87505
 Phone:(505) 476-3470 Fax:(505) 476-3462

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Form C-102
 Permit 23892

WELL LOCATION AND ACREAGE DEDICATION PLAT

1. API Number 30-039-29817	2. Pool Code 72319	3. Pool Name BLANCO-MESAVERDE (PRORATED GAS)
4. Property Code 31325	5. Property Name SAN JUAN 29 5 UNIT	6. Well No. 045A
7. OGRID No. 217817	8. Operator Name CONOCOPHILLIPS COMPANY	9. Elevation 6813

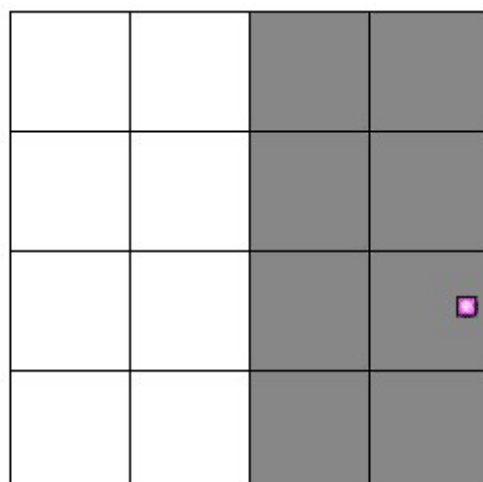
10. Surface Location

UL - Lot I	Section 22	Township 29N	Range 05W	Lot Idn	Feet From 2040	N/S Line S	Feet From 265	E/W Line E	County RIO ARriba
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11. Bottom Hole Location If Different From Surface

UL - Lot	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
12. Dedicated Acres 320.00	13. Joint or Infill	14. Consolidation Code	15. Order No.						

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location(s) or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

E-Signed By: Yolanda Perez
 Title: Sr. Regulatory Analyst
 Date: 2/17/2006

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

Surveyed By: jason edwards
 Date of Survey: 12/29/2005
 Certificate Number: 15269