

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010

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.

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMLC068282B
2. Name of Operator CONOCOPHILLIPS COMPANY Contact: KRISTINA MICKENS E-Mail: kristina.mickens@conocophillips.com		6. If Indian, Allottee or Tribe Name
3a. Address 3300 N "A" ST BLDG 6 MIDLAND, TX 79710-1810	3b. Phone No. (include area code) Ph: 832-486-2022	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 25 T26S R31E SWSW 465FSL 530FWL		8. Well Name and No. GOLDEN SPUR 25 FBS 3H
		9. API Well No. 30-015-41230-00-X1
		10. Field and Pool, or Exploratory RED HILLS
		11. County or Parish, and State EDDY COUNTY, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 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
	<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 recompleat 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 recompleat 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.)

As part of our operations to prepare the well for frac operations, we test the casing to Max Frac Pressure. During this pressure test the 5-1/2" 17# casing on the Golden Spur 25 FBS 3H failed. Currently, we are able to inject 2 bpm down the 5-1/2" casing and receive ~1.5 bpm returns up the 9-5/8" x 5-1/2" annulus. The calculated TOC on the 5-1/2" casing is 3,965' and there were full returns during the cement job so we believe the failure is above 3,965'. Also the 9-5/8" shoe is at 6,635'.

Monday, 11/4/13 ConocoPhillips plans to move in a Well Service Unit to the Golden Spur 25 FBS 3H and we will trip in hole with a packer so that we can determine where the leak is. Once the leak is found, we plan to remediate the casing by backing off below the failed joint. We will trip out with the 5-1/2" casing, laying down any damaged joints. We will then run in the hole with 5-1/2"

Accepted for record
NMOCD TES 11/7/2013

SEE ATTACHED FOR
CONDITIONS OF APPROVAL

RECEIVED
NOV 05 2013
NMOCD ARTESIA

14. I hereby certify that the foregoing is true and correct. Electronic Submission #225203 verified by the BLM Well Information System For CONOCOPHILLIPS COMPANY, sent to the Carlsbad Committed to AFMSS for processing by CHRISTOPHER WALLS on 11/01/2013 (14CRW0153SE)	
Name (Printed/Typed) KRISTINA MICKENS	Title REGULATORY SPECIALIST
Signature (Electronic Submission)	Date 10/31/2013

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____
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 _____

APPROVED
NOV 1 2013
/s/ Chris Walls
BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. 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.

Additional data for EC transaction #225203 that would not fit on the form

32. Additional remarks, continued

casing to the top of the 5-1/2" casing in the well and screw the casing back together. Of course the remediation plan may change depending on where exactly the failure occurred.

If everything goes as planned we should have the leak identified by Wed 1:1/6/13.

Conditions of Approval

Golden Spur 25 FBS 3H

3001541230

1. Approved to run the same casing as previously installed.
2. If casing cannot be replaced and an alternate remedial method is required, the operator must receive approval from the BLM for the change in plans.

CRW 110113