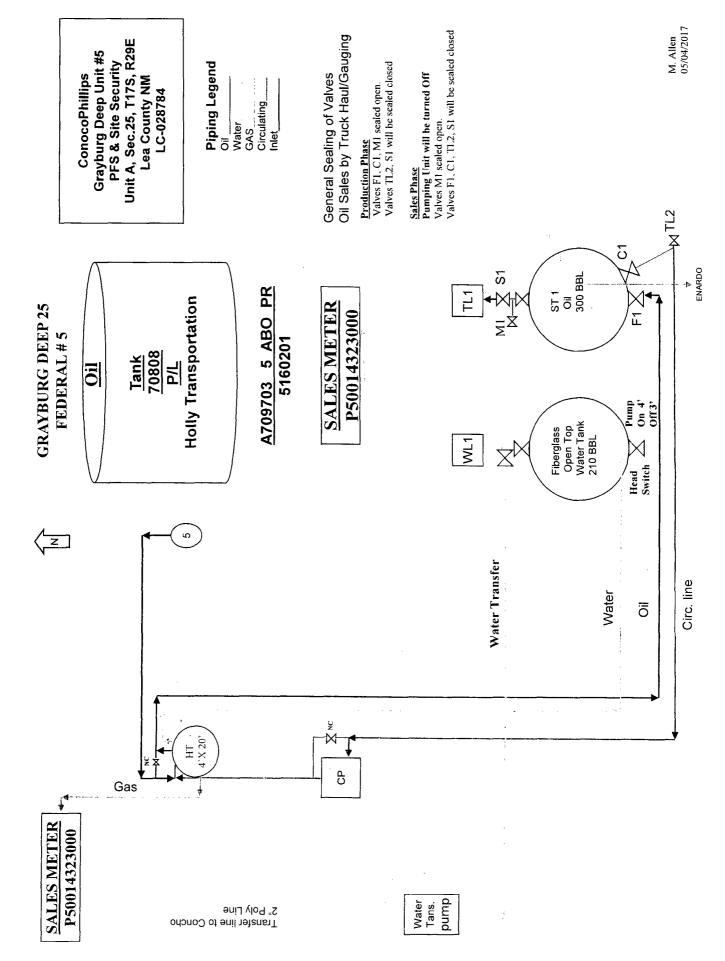
Form \$160-5 June 2015)	UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT				OCD Arte	SIA OMB N Expires: J	APPROVED O. 1004-0137 anuary 31, 2018		
		Y NOTICES AND REPORTS ON WELLS					 Lease Serial No. NMLC028784C 		
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.							6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE - Other instructions on page 2						7. If Unit or CA/Agreement, Name and/or No.			
1. Type of Well ☐ Gas Well ☐ Other						8. Well Name and No. GRAYBURG DEEP 25 FEDERAL 5			
2. Name of Operator CONOCOPHILLIPS COMPANY CONOCOPHILLIPS COMPANY E-Mail: Susan.B.Maunder@conocophillips.com							9. API Well No. 30-015-03083		
3a. Address3b. Phone No. (include area of 600 N. DAIRY ASHFORD RD. OFFICE EC3-10-W285HOUSTON, TX 77079-1175Ph: 281-206-5281							10. Field and Pool or Exploratory Area BEAR GRASS DRAW-ABO		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					11. County or Parish, State				
Sec 25 T17S R29E Mer NMP NENE 330FNL 660FEL					EDDY COUNTY, NM				
12.	CHECK THE AF	PPROPRIATE BOX(ES)	TO INDICATE N	NATUR	E OI	F NOTICE,	L REPORT, OR OT	HER DATA	
TYPE OF S	SUBMISSION		TYPE OF ACTION						
□ Notice of Intent		□ Acidize	idize 🗖 Deepen		Product	Production (Start/Resume) Water Shut-O			
		Alter Casing		Hydraulic Fracturing		Reclamation		Well Integrity	
-	uent Report Casing Repair New Construction		C Recomplete		Other Site Facility Diagr				
🗖 Final Abar	ndonment Notice	□ Change Plans □ Plug and Aband □ Convert to Injection □ Plug Back			n	Temporarily Abandon M/Security Pla Water Disposal		m/Security Plan	
following com testing has bee determined tha	pletion of the involved in completed. Final Ab at the site is ready for fi	k will be performed or provide operations. If the operation re- pandonment Notices must be fil inal inspection. brnits this report of site di	sults in a multiple con ed only after all requi	pletion of	r reco	mpletion in a	new interval, a Form 31	60-4 must be filed once	
	,	binits this report of site di	agram update.		Acc	ented fo	r Record Purpo	scs.	
Attached is		Approval Subject to Onsite Inspection.							
Thank you f		Date:							
		\QT⊊	SIA DETRIC	۰.					
Accepte	d for record • N	-/0 MOCD	3 2 6 200						
	<u></u>		CEIVED			· •-	• •		
14. I hereby certi	fy that the foregoing is	Electronic Submission #	HILLIPS COMPAN	Y, senti	to the	e Carlsbad	-		
	Name (Printed/Typed) SUSAN MAUNDER					REGULA	TORY COORDINAT	OR	
Name (Printed)			Dat	e 05/2	25/20)17			
Name (Printed) Signature	(Electronic S	ubmission)		-	TE (OFFICE U	SE		
	(Electronic S	ubmission) THIS SPACE FC		RSTA					
Signature	(Electronic S							Date	
Signature Approved By Conditions of appro ertify that the appli	val, if any, are attached	THIS SPACE FC	DR FEDERAL O					Date	

** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **



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