

UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
N.M. Oil Cons. Division  
1625 N. French Dr.  
Hobbs, NM 88240

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

**SUBMIT IN TRIPLICATE**

1. Type of Well  
 Oil Well     Gas Well     Other

2. Name of Operator  
 ConocoPhillips Company

3. Address and Telephone No.  
 4001 Penbrook, Odessa, Texas 79762 915 368-1373

4. Location of Well (Footage, Sec., T. R. M. or Survey Description)  
 Sec 23, T20S, R37E C  
 330' FNL & 2310' FWL

5. Lease Designation and Serial No.  
 NM 0557686

6. If Indian, Allottee or Tribe Name

7. If Unit or C.A. Agreement Designation

8. Well Name and No.  
 SEMU, Well #162

9. API Well No.  
 30 025 35774

10. Field and Pool, or Exploratory Area  
 Monument Tubb/Weir Drinkard

11. County or Parish, State  
 Lea, NM

**CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent <input checked="" type="checkbox"/> Subsequent Repon <input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Abandonment <input type="checkbox"/> Recompletion <input type="checkbox"/> Plugging Back <input type="checkbox"/> Casing Repair <input type="checkbox"/> Altering Casing <input checked="" type="checkbox"/> Other <b>DHC</b>
	<input type="checkbox"/> Change of Plans <input type="checkbox"/> New Construction <input type="checkbox"/> Non-Routine Fracturing <input type="checkbox"/> Water Shut-Off <input type="checkbox"/> Conversion to Injection <input type="checkbox"/> Dispose Water

**SUBJECT TO LIKE APPROVAL BY STATE**

Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

10-1-02: ND tree, NU BOP, test to 5000#. Set RBP @ 6583'. Test casing. Spotted 500 gals 15% NEFE acid to 5980'. Rigged down BJ.  
 10-2-03: Perforated Tubb 2 spf @ 6430-6436, 6450-6463', 6471-6480'. RDWL. Tag RBP @ 6485', spot 500 gals @ 15% NEFE.  
 10-3-03: RU BJ - 2000 gal 15% acid job, flowed well open.  
 10-4-03: Rigged up separator and test well for 3 hrs.  
 10-7-03: Pumped brine, ND BOP NU frac valve, test valve to 5000#. Prep to frac Tubb.  
 10-8-03: Tagged fluid. Ran GR/CCL log over Tubb interval. SI>  
 10-9-03: Bleed well to test tank for 4 hours. SI  
 10-10-03: Attempt to frac Tubb, did not take frac fluid. RIH & released RBP, POOH w/RBP & tubing. SI  
 10-17-03: Rods & tubing in hole, well SI.  
 10-18-03: Well put on production: Drinkard perfs @ 6620-6848'. Tubb perfs @ 6430-6480'.  
 Form 3160-4 filed for Tubb/Drinkard DHC completion on 2-5-03.

*[Handwritten signature and stamp]*

14. I hereby certify that the foregoing is true and correct.

Signed *[Signature]* Title Ann E. Ritchie Date 3-19-03  
 Regulatory Agent

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
 Conditions of approval if any:

BLM(8)

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SUPPORT SERVICES  
ROSNILLE OFFICE