Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

ł	FORM APPROVED
OBBS OCD_	OMB NO. 1004-013: Expires: July 31, 201

SUNDI	RY NOT	TICES AN	ID REPO	ORTS ON	WELLS
Do not use	this for	rm for pro	posals to	o drill or to	o re-enter an
			400 0 / 0 0		, ,

5. Lease Serial No.

Do not use thi	s form for proposals to dri I. Use form 3160-3 (APD) f	ill or to re-	enter an 🔒 🛭	N 07 20	6. If Indian, Allottee o	r Tribe Name	
SUBMIT IN TRII	PLICATE - Other instruction	ns on reve	rse side.	RECEIVE	7. If Unit or CA/Agree	ement, Name and/or No.	
Type of Well ☐ Oil Well ☐ Gas Well ☑ Oth		8. Well Name and No. WILDER FEDERA	AL 29 SWD 1				
Oil Well ☐ Gas Well ☑ Other: INJECTION 2. Name of Operator CONOCOPHILLIPS COMPANY Contact: ASHLEY BERGE E-Mail: ashley.martin@conocophillips					9. API Well No. 30-025-40500-0	0-S1	
3a. Address 3300 N "A" ST BLDG 6 MIDLAND, TX 79705	b. Phone No. h: 432-688	(include area code 1-6938		10. Field and Pool, or Exploratory SWD			
4. Location of Well (Footage, Sec., T.	., R., M., or Survey Description)				11. County or Parish, a	and State	
Sec 29 T26S R32E SENW 20		LEA COUNTY, NM					
12. CHECK APPR	ROPRIATE BOX(ES) TO IN	NDICATE	NATURE OF 1	NOTICE, RI	EPORT, OR OTHEI	R DATA	
TYPE OF SUBMISSION		TYPE OF ACTION					
☐ Notice of Intent	☐ Acidize	□ Deep	en	☐ Production (Start/Resume)		■ Water Shut-Off	
_	☐ Alter Casing	☐ Fract	ure Treat	Reclam	ation	☐ Well Integrity	
Subsequent Report	□ Casing Repair	□ New	Construction	□ Recomp	olete	☐ Other	
☐ Final Abandonment Notice	☐ Change Plans		and Abandon	d Abandon			
	☐ Convert to Injection	☐ Plug	Back	□ Water I			
testing has been completed. Final At determined that the site is ready for fi Interim reclmation completed	inal inspection.)	only after all r	equirements, includ	ling reclamatio	n, have been completed,	and the operator has	
Accepted for Record Purposes. Approval Subject to Onsite Inspection. If BLM Objectives are not achieved, additional work may be required. Date: /2-28-/3							
14. I hereby certify that the foregoing is	true and correct. Electronic Submission #230 For CONOCOPH aitted to AFMSS for processing	IILLIPS CON	IPANY, sent to	the Hobbs	-		
Name (Printed/Typed) ASHLEY BERGEN			Title STAFF	REGULATO	ORY TECH		
Signature (Electronic S	gnature (Electronic Submission) Date			2013			
	THIS SPACE FOR	FEDERA	L OR STATE	OFFICE U	SE		
Approved By ACCEPTED			JAMES A AMOS _{Title} SUPERVISORY EPS		Date 12/28/2013		
Conditions of approval, if any, are attache certify that the applicant holds legal or equivalent would entitle the applicant to conduct the conductive transfer of the conductive trans	Office Hobbs		UN				
Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent					ake to any department or	agency of the United	

** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **

JAN 08 2014