

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

HOBBS OCD

NOV 09 2015

OCD-HOBBS

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. RECEIVED

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <i>INT</i>		5. Lease Serial No. NMLC031670A
2. Name of Operator CONOCOPHILLIPS COMPANY Contact: ASHLEY BERGEN E-Mail: ashley.bergen@conocophillips.com		6. If Indian, Allottee or Tribe Name
3a. Address MIDLAND, TX 79710	3b. Phone No. (include area code) Ph: 432-688-6983	7. If Unit or CA/Agreement, Name and/or No. 892000321E
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 24 T20S R37E SENE 2139FNL 0265FEL 32.333585 N Lat, 103.115034 W Lon		8. Well Name and No. SEMU 247
		9. API Well No. 30-025-42019-00-X1
		10. Field and Pool, or Exploratory SKAGGS
		11. County or Parish, and State LEA COUNTY, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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 checked="" 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	Onshore Order Variance
	<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.)

12/12/14 RIH gamma ray.

12/16/14 NU Frac stack. PT Frac stack & csg to 2000 PSI for 2mins, 2000 PSI for 2 mins & 6730 PSI for 10 mins- Test good.

12/18/14 RIH w/ perf gun & shot perfs @ 3859'-4077'. Pumped 12,000 gals of 15% acid.

1/7/15. RIH w/ 120 jts, 2 3/8", 4.7#, J-55 tbg set @ 3836' & pkr set @ 3828'.

1/8/15 ND BOP NU WH. Ran MIT 580#/ 30 mins- Test good (see attached chart). RDMO.

As of 5/20/15 there was 210 PSI on the casing. ConocoPhillips is gathering additional data per NMOC request.

Administrative order WFX-937

SUBJECT TO LIKE
APPROVAL BY STATE

14. I hereby certify that the foregoing is true and correct. Electronic Submission #303672 verified by the BLM Well Information System For CONOCOPHILLIPS COMPANY, sent to the Hobbs Committed to AFMSS for processing by LINDA JIMENEZ on 07/27/2015 (15LJ1356SE)		mw	
Name (Printed/Typed) ASHLEY BERGEN	Title STAFF REGULATORY TECH		
Signature (Electronic Submission)	Date 06/02/2015	ACCEPTED FOR RECORD	
THIS SPACE FOR FEDERAL OR STATE OFFICE USE			
Approved By _____	Title _____	Date _____	
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 _____	
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.			

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

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

NOV 9 2015

B8 11/24/15

