Form 3160-5 UNITED STATES (September 2001) DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT				FORM APPROVED OMB No. 1004-0135 Expires: January 31, 2004 5. Lease Serial No.	
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.				LC 029405B 6. If Indian, Allottee or Tribe Name	
1. Type of Well	NPLICATE - Other Instru	ctions on rever	se sice	8920003410	Agreement, Name and/or No.
	Other Injection Well		· · · ·	8. Well Name a MCA Unit # 0	
2. Name of Operator ConocoPhillips Co.	. · · ·	and the second		9. API Well No	
3a. Address		3b. Phone No. (incl	ude area code)	30-025-08046	
P.O. Box 180, Maljamar, NM 8	8264-0180	505.676.5569		10. Field and Po	ol, or Exploratory Area
4. Location of Well (Footage, Sec.,	T, R., M., or Survey Description)	and the second	••••••••••••••••••••••••••••••••••••••	Maljamar GB	
1980' FSL & 660' FWL, Sec. 19,	, T 17S, R 32E, L	1		11. County or Pa	rish, State
			and the states of	Lea Co., NM	
	PROPRIATE BOX(ES) TO	· · · · · · · · · · · · · · · ·			THER DATA
TYPE OF SUBMISSION		·····	TYPE OF ACTION		· · · · · · · · · · · · · · · · · · ·
<b>—</b>	Acidize	Deepen	Production (Star	(Resume)	Water Shut-Off
Notice of Intent	Alter Casing	Fracture Treat	Reclamation		Well Integrity
Subsequent Report	Casing Repair	New Construction		U.	Other
Final Abandonment Notice	Change Plans	Plug and Abandon		andon	
	Convert to Injection	Plug Back	Water Disposal		···
following completion of the inv testing has been completed. Fin determined that the site is ready ConocoPhillips requests renewal currently on file with your office. As per our agreement of 04/28/0 evaluation will be completed and	approval of Temporary Abanda The State has approved the M 4 at the Buckeye, NM meeting, action taken before the State ap	filed only after all req onment status for the IT until 06/13/06. we plan to retain th pproved MIT expire	uirements, including reclar e above referenced well. is wellbore for evaluations. WED FOR	n to recomplete, r	completed, and the operator has
Name (Printed/Typed) Kenneth N. Andersen		Title	SHEaR Specialist		
Signature Kennel	t n. Chales		06/08/04		
	THIS SPACE FO	OR FEDERAL OR	STATE OFFICE USE		
Approved by (Signature) RIG. SGD.) DAVID R. GLASS			Name (Printed/Typed)	Titl	JUN 2 1 2004
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.					
Title 18 U.S.C. Section 1001 and Ti States any false, fictitious or fraudule	tle 43 U.S.C. Section 1212, make i ent statements or representations as	it a crime for any person to any matter within it	on knowingly and willfully s jurisdiction.	to make to any dep	artment or agency of the United
(Continued on next page)	1				

6°)	1
<u>(</u> )	JW