

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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.

FORM APPROVED
OMB No. 1004-0135
Expires: January 31, 2004

5. Lease Serial No.
LC 029405A
6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other
2. Name of Operator
ConocoPhillips Co.
3a. Address
P.O. Box 180, Maljamar, NM 88264-0180
3b. Phone No. (include area code)
505.676.5569
4. Location of Well (Footage, Sec., T, R., M., or Survey Description)
1980' FNL & 660' FWL, Sec. 20, T 17S, R 32E, E.

7. If Unit or CA/Agreement, Name and/or No.
8920003410
8. Well Name and No.
MCA Unit # 051
9. API Well No.
30-025-08058
10. Field and Pool, or Exploratory Area
Maljamar GB/SA
11. County or Parish, State
Lea Co., 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 type="checkbox"/> Other _____
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input checked="" type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

3. 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 recompleate 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 recompleation 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.)

ConocoPhillips requests renewal approval of Temporary Abandonment status for the above referenced well. A valid MIT was run on 06/19/03 and is currently on file with your office.

As per our agreement of 04/28/04 at the Buckeye, NM meeting, we plan to retain this wellbore for evaluation to recompleate, reactive, or P & A. This evaluation will be completed and action taken before the State approved MIT expires.

APPROVED FOR 12 MONTH PERIOD
ENDING JUN 19 2005

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Kenneth N. Andersen

Title SHEaR Specialist

Signature

Kenneth N. Andersen

Date 06/08/04

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by (Signature) (Printed/Typed) DAVID H. GLASS

Name
(Printed/Typed)

Title

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

Date

JUN 21 2004

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.

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