Form 3160-5 (August 2007)	UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT				OBBS OCE	FORM APPROVED OMB NO. 1004-0135 Expires: July 31, 2010 5. Lease Serial No.	
Do	not use th	NOTICES AND REPORT	ill or to re	ELLS		NMLC068281B	
aba	ndoned we	II. Use form 3160-3 (APD) :	for such	proposals. JA	N 1 3 2014	6. If Indian, Allottee of	a Tribe Name
SUBMIT IN TRIPLICATE - Other instructions on reverse side.						7: If Unit or CA/Agreement, Name and/or No.	
1. Type of Well Gas Well Other						8. Well Name and No. BUCK 20 FEDERAL 2H	
2. Name of Operator CONOCOPHILLIPS / Contact: ASHLEY BERGEN E-Mail: ashley.bergen@conocophillips.com						9. API Well No. 30-025-40483	
3a. Address 3b. Phone No. (include area code) P.O. BOX 51810 Ph: 432-688-6983 MIDLAND, TX 79710 //						10. Field and Pool, or Exploratory WILDCAT; BONE SPRING	
4. Location of Well (F		11. County or Parish, and State		ind State			
Sec 20 T26S R32E NWNE 215FNL 1760FEL					LEA COUNTY, NM		
12. Cl	HECK APPI	ROPRIATE BOX(ES) TO I	NDICAT	E NATURE OF 1	NOTICE, RI	EPORT, OR OTHER	R DATA
TYPE OF SUBMI	SSION	TYPE OF ACTION				``	
□ Notice of Intent		Acidize	🗖 De	Deepen		ion (Start/Resume)	Uwater Shut-Off
Subsequent Repo	-	Alter Casing	—	cture Treat	Reclamation		Well Integrity
		Casing Repair		w Construction	Recomplete		🗖 Other
Final Abandonm	 Final Abandonment Notice Change Plans Convert to Injection 		Plug and Abandon Plug Back		 Temporarily Abandon Water Disposal 		
following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator determined that the site is ready for final inspection.) Interim reclamation completed 2-11-13. Accepted for Record Purposes. Approval Subject to Onsite Inspectio if BLM Objectives are not achieved,							nd the operator has
Additional work may be required. Date: 1-7-14 Mignature: A- Common							
14. I hereby certify that the foregoing is true and correct. Electronic Submission #230061 verified by the BLM Well Information System For CONOCOPHILLIFS, sent to the Hobbs Committed to AFMSS for processing by JOHNNY DICKERSON on 12/19/2013 ()							
Name (Printed/Typed) ASHLEY BERGEN				Title STAFF	REGULATO	RY TECH	
Signature (Electronic Submission)				Date 12/19/20	113	K	K
		THIS SPACE FOR	FEDER			se	<u> </u>
				· · · · · · · · · · · · · · · · · · ·			
Approved By				Title Office			Date
Title 18 U.S.C. Section 100 States any false, fictitious	1 and Title 43 or fraudulent s	U.S.C. Section 1212, make it a crim tatements or representations as to a	ne for any p my matter w	erson knowingly and vithin its jurisdiction.	willfully to ma	ke to any department or a	gency of the United
*	* OPERAT	OR-SUBMITTED ** OPE	RATOR	-SUBMITTED **	* OPERAT	or-submitted *	å 2014 (