UNITED STATES DEPARTMENT OF THE INTERIOR

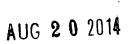
OCD Hobbs

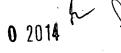
FORM APPROVED OMB NO. 1004-0135

BUREAU OF LAND MANAGEMENT HOBBS OCD						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 1 8 2014					5. Lease Serial No. NMLC058408A		
					6. If Indian, Allottee or Tribe Name		
					o. Il Indian, Anottee C	i tribe name	
SUBMIT IN TRIPLICATE - Other instructions on reverse side. RECEIVED					7. If Unit or CA/Agreement, Name and/or No. 8920003410		
1. Type of Well					8. Well Name and No. MCA UNIT 451		
Oil Well Gas Well Other: INJECTION 2. Name of Operator Contact: ASHLEY BERGEN					9. API Well No.	•	
CONOCOPHILLIPS COMPANY , E-Mail: ashley.bergen@conocophillips.com					30-025-41391-00-S1		
3a. Address		3b. Phone No. (include area code) Ph: 432-688-6983			10. Field and Pool, or Exploratory MALJAMAR		
MIDLAND, TX 79710				-0000 ININEUNIA			
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					11. County or Parish, and State		
Sec 26 T17S R32E SWNE 1365FNL 2180FEL 32 483260 N Lat, 103 440806 W Lon					LEA COUNTY, NM		
12. CHECK APPE	ROPRIATE BOX(ES) T	O INDICATE	NATURE OF N	NOTICE, RE	EPORT, OR OTHE	R DATA	
TYPE OF SUBMISSION	TYPE OF ACTION						
Clatent Clatent	☐ Acidize	☐ Dee	pen	☐ Producti	ion (Start/Resume)	☐ Water Shut-Off	
☐ Notice of Intent	☐ Alter Casing	☐ Frac	ture Treat	☐ Reclamation		■ Well Integrity	
Subsequent Report ■	ent Report		☐ New Construction ☐ Re		lete	Other	
☐ Final Abandonment Notice	☐ Change Plans	☐ Plug and Abandon ☐ `		□ Tempor	arily Abandon	Drilling Operations	
	Convert to Injection	Plug	g Back	■ Water Disposal			
13. Describe Proposed or Completed Ope If the proposal is to deepen directions. Attach the Bond under which the wor following completion of the involved testing has been completed. Final Al determined that the site is ready for f	ally or recomplete horizontally rk will be performed or provident to operations. If the operation re- pandonment Notices shall be fi	, give subsurface e the Bond No. of esults in a multip	locations and measu in file with BLM/BIA le completion or reco	red and true ve Required sub mpletion in a r	rtical depths of all pertir sequent reports shall be new interval, a Form 316	nent markers and zones. filed within 30 days 0-4 shall be filed once	
The following well was first injected on June 1,2014.							
		·		•			
					•		
	<i>,</i>						
			,				
WFK-918							
14. I hereby certify that the foregoing is	Electronic Submission #	OPHILLIPS CO	MPÁNY. sent to t	he Hobbs	•		
	ommitted to AFMSS for pro	ocessing by C			· ·		
Name (Printed/Typed) ASHLEY I	DERGEN		Title STAFF	REGULATO	KT IEUH		
Signature (Electronic Submission) Date 06/11/2014							
	THIS SPACE F	OR FEDERA	L OR STATE	OFFICE U	SE		
Approved By ACCEPT	-	JAMES A AMOS TitleSUPERVISORY PET Date 08/10			Date 08/10/2014		
Approved by			Time-3. Elitar	· · · · · · · · · · · · · · · · · ·		1 500 00/10/2014	

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.

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 Hobbs

