

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

HOBBS OCD

SEP 02 2014

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.

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other: UNKNOWN OTH		5. Lease Serial No. NMLC068282B
2. Name of Operator CONOCOPHILLIPS		6. If Indian, Allottee or Tribe Name
3a. Address P.O. BOX 51810 MIDLAND, TX 79710		7. If Unit or CA/Agreement, Name and/or No.
3b. Phone No. (include area code) Ph: 432-688-6938		8. Well Name and No. GOLDEN SPUR FEDERAL 1
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		9. API Well No.
		10. Field and Pool, or Exploratory WILDCAT
		11. County or Parish, and State EDDY 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	Venting and/or Flaring
	<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 recomplete 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 recompletion 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 request to vent/flare from 8/13/14/ thru 11/13/14 the following wells:

Golden Spur Federal 1Y API# 30-015-39649
Golden Spur Federal WC 25 2H API# 30-015-41235
Golden Spur Federal FBS 3H API# 30-015-41230

OCD Conditions of Approval
Accepted for **RECORD ONLY**. All Federal
forms require **BLM APPROVAL**.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #256489 verified by the BLM Well Information System For CONOCOPHILLIPS, sent to the Carlsbad	
Name (Printed/Typed) ASHLEY BERGEN	Title STAFF REGULATORY TECH
Signature (Electronic Submission)	Date 08/11/2014

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.

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

MSSB/OCD 9/3/2014

SEP 04 2014

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 S. First St., Artesia, NM 88210
District III
1000 Rio Brazos Road, Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy Minerals and Natural Resources

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-129
Revised August 1, 2011

Submit one copy to appropriate
District Office

NFO Permit No. _____
(For Division Use Only)

APPLICATION FOR EXCEPTION TO NO-FLARE RULE 19.15.18.12

(See Rule 19.15.18.12 NMAC and Rule 19.15.7.37 NMAC)

HOBBS OCD

SEP 02 2014

RECEIVED

A. Applicant ConocoPhillips Company,
whose address is P.O. Box 51810 Midland, TX 79710,
hereby requests an exception to Rule 19.15.18.12 for _____ days or until
November 13, Yr 2014, for the following described tank battery (or LACT):

Name of Lease Golden Spur Federal 1Y Name of Pool Wildcat: Bone Spring

Location of Battery: Unit Letter N Section 25 Township 26S Range 31E

Number of wells producing into battery 3

B. Based upon oil production of _____ barrels per day, the estimated * volume
of gas to be flared is 60 MCF; Value _____ per day.

C. Name and location of nearest gas gathering facility:

D. Distance _____ Estimated cost of connection _____

E. This exception is requested for the following reasons: _____

ConocoPhillips request to vent/flame from August 13, 2014 thru November 13, 2014. We will vent/flame

60 mcf/d.

Golden Spur Federal 1Y-API# 30-015-39649

Golden Spur Federal WC 25 2H- API# 30-015-41235

OPERATOR

I hereby certify that the rules and regulations of the Oil Conservation
Division have been complied with and that the information given above
is true and complete to the best of my knowledge and belief.

Signature Ashley Bergen

Printed Name
& Title Ashley Bergen Staff Regulatory Technician

E-mail Address ashley.bergen@cop.com

Date 08/11/2014 Telephone No. (432)688-6938

OIL CONSERVATION DIVISION

Approved Until _____

By _____

Title _____

Date 9/3/2014
MMB

Accepted for Record Only

* Gas-Oil ratio test may be required to verify estimated gas volume.