Form 3160-5				OCD Hob	bs		
(August 2007)		UNITED STATES EPARTMENT OF THE IN UREAU OF LAND MANAG	NTERIOR	HOB	BSOCD	OMB N Expires	APPROVED IO. 1004-0135 : July 31, 2010
	SUNDRY NOTICES AND REPORTS ON WELLS					5. Lease Serial No. NMLC058395	
_	Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals UN 0 1 2015					6. If Indian, Allottee	or Tribe Name
	SUBMIT IN TRI	PLICATE - Other instruc	se side. REC	EIVED	7. If Unit or CA/Agre N/A	ement, Name and/or No.	
1. Type of Well	🔲 Gas Well 🔲 Otl	hor				8. Well Name and No. SC FEDERAL 7	· · · · · · · · · · · · · · · · · · ·
2. Name of Oper		- Contact:	SUSAN B MAL aunder@conoco	UNDER 9. API Well No. 30-025-40587			
	IRY ASHFORD RD I, TX 77079-1175)	include area code) 10. F -5281 M/ 5745		10. Field and Pool, or MALJAMAR; Y	Exploratory ESO WEST	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			_			11. County or Parish, and State	
Sec 22 T17S R32E Mer NMP NESE 2210FSL 915FEL						LEA COUNTY	COUNTY, NM
	12. CHECK APP	ROPRIATE BOX(ES) TO) INDICATE N	ATURE OF N	NOTICE, R	EPORT, OR OTHE	R DATA
TYPE OF	SUBMISSION			TYPE OF	F ACTION		
			🗖 Deepe	cen 🖸 Produc		tion (Start/Resume)	U Water Shut-Off
☑ Notice of Intent		Alter Casing	G Fractu	re Treat	🗖 Reclam	ation	U Well Integrity
Subsequent Report		Casing Repair	🗖 New (Construction	Recomplete		🛛 Other
🗖 Final Aba	andonment Notice	Change Plans	_	nd Abandon	Temporarily Abandon Water Disposal		
		peration (clearly state all pertinen	Plug I			<u> </u>	
approval e	extension to May 18	assumed operatorship of t 3, 2015, so the well can be	drilled in early	2015.	e-year		
		· .					
	•					·	
					APPI	ROVED FOR/2	MONTH PERIOD
0	Λ = π	···· -] · · /			END	ING <u>5-18-2</u>	015
19. F	Par. JA	M 3/9/14	1-her	COA	<u> </u>		
4. Hereby cer	tify that the foregoing i	Electronic Submission #	230645 verified	by the BLM We PANY, sent to t	ll Informatio	n System	
Name (Printe	ed/Typed) SUSAN F	Committed to AFMSS for	JOHNNY DICKERSON on 01/10/2014 () Title SENIOR REGULATORY SPECIALIST				
Name (Printed/Typed) SUSAN B MA							
Signature	(Electronic	Submission)		Date 12/30/2		· · ·	<u></u>
		THIS SPACE FO		OR STATE		ISE	
Approved By	1. 8. W. K.	tokz		Title EPS			Date 5/26/15
Conditions frapproval, 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 CFO	>	Kto Kto	
		3 U.S.C. Section 1212, make it a t statements or representations as				nake to any department o	or agency of the United
	** OPERA	TOR-SUBMITTED ** O	PERATOR-S	UBMITTED	** OPERA	TOR-SUBMITTEI	D **
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						JUN 09	2015 MM
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JUN	0	9	2015