	5. Lease Serial No.					
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.				TORRS	NMNM27508  6. If Indian, Allottee or Tribe Name	
SUBMIT IN TRIPLICATE - Other instructions on reverse side.				7. If Unit or CA/Agree	ement, Name and/or No.	
1. Type of Well	8. Well Name and No.	-DAL CIA/D 4				
Oil Well Gas Well Other: UNKNOWN OTH  2. Name of Operator Contact: ASHLEY BERGEN				9. API Well No.	ERAL SWD 1	
Name of Operator     CONOCOPHILLIPS	ASHLEY BERGEN rgen@conocophillips.cor	Oconocophillips.com				
3a. Address P.O. BOX 51810 MIDLAND, TX 79710		3b. Phone No. (include area code) Ph: 432-688-6938		10. Field and Pool, or SWD; BELL CA	10. Field and Pool, or Exploratory SWD; BELL CANYON	
4. Location of Well (Footage	e, Sec., T., R., M., or Survey Descriptio	n) MA	MAR 1 4 2000		11. County or Parish, and State	
Sec 29 T26S R32E Me	WL RI	RECEIVED		LEA COUNTY, NM		
12. CHECH	X APPROPRIATE BOX(ES) T	O INDICATE NATU	RE OF NOTICE	E, REPORT, OR OTHE	R DATA	
TYPE OF SUBMISSION TYPE			TYPE OF ACTIO	N		
☐ Notice of Intent	☐ Acidize	□ Deepen	□ Pro	duction (Start/Resume)	☐ Water Shut-Off	
	☐ Alter Casing	☐ Fracture Tre	at 🔲 Rec	clamation	■ Well Integrity	
Subsequent Report	☐ Casing Repair	■ New Constru	action	complete	<b>⊘</b> Other	
☐ Final Abandonment Notice ☐ Change Plans		☐ Plug and Ab	andon   Ter	☐ Temporarily Abandon Site Facility Diag m/Security Plan		
	☐ Convert to Injection	njection Plug Back		ter Disposal	,	
following completion of the testing has been completed. determined that the site is re	h the work will be performed or provided involved operations. If the operation in Final Abandonment Notices shall be fady for final inspection.)  If the work will be performed or provided in the performance of the performed or provided in the performance of the p	esults in a multiple comple iled only after all requireme	tion or recompletion ents, including reclan	in a new interval, a Form 316	0-4 shall be filed once	
Conocornilips respect	tiully submits the site facility that	grain. Flease see the	attacriment.			
			1	pproval Subject to (te: 2/24/16	D	
14. I hereby certify that the for	Electronic Submission	#330275 verified by the	BLM Well Inform	ation System		
	10100	SNOOOF MELINO, Sent	to the Hobbs			
Name (Printed/Typed) AS	SHLEY BERGEN	Title	REGULATORY	SPECIALIST		
Signature (Ele	ectronic Submission)	Date	02/01/2016			
	THIS SPACE F	OR FEDERAL OR	STATE OFFIC	E USE	ANG THE	
Approved By		Title			Date	
Approved By  Conditions of approval, if any, are attached. Approval of this notice does not warrar certify that the applicant holds legal or equitable title to those rights in the subject le					,	
which would entitle the applicant	t to conduct operations thereon.	Office				
Title 18 U.S.C. Section 1001 and States any false, fictitious or fra	Title 43 U.S.C. Section 1212, make it audulent statements or representations	a crime for any person kno as to any matter within its j	wingly and willfully urisdiction.	to make to any department or	agency of the United	

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

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