

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Hobbs

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<br><input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other: UNKNOWN OTH | 8. Well Name and No.<br>SEMU 128 ✓                                     |
| 2. Name of Operator<br>CONOCOPHILLIPS COMPANY   | Contact: SUSAN B MAUNDER<br>E-Mail: Susan.B.Maunder@conocophillips.com |
| 3a. Address<br>600 N. DAIRY ASHFORD RD. OFFICE EC3-10-W285<br>HOUSTON, TX 77079-1175  | 3b. Phone No. (include area code)<br>Ph: 281-206-5281                  |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)<br>Sec 24 T20S R37E Mer NMP NESE 2490FSL 1310FEL ✓                     | 10. Field and Pool, or Exploratory<br>WARREN                           |
|   | 11. County or Parish, and State<br>LEA COUNTY 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 checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Deepen                    |
| <input type="checkbox"/> Final Abandonment Notice     | <input type="checkbox"/> Fracture Treat            |
|   | <input type="checkbox"/> New Construction          |
|   | <input type="checkbox"/> Plug and Abandon          |
|   | <input type="checkbox"/> Plug Back                 |
|   | <input type="checkbox"/> Production (Start/Resume) |
|   | <input checked="" type="checkbox"/> Reclamation    |
|   | <input type="checkbox"/> Recomplete                |
|   | <input type="checkbox"/> Temporarily Abandon       |
|   | <input type="checkbox"/> Water Disposal            |
|   | <input type="checkbox"/> Water Shut-Off            |
|   | <input type="checkbox"/> Well Integrity            |
|   | <input type="checkbox"/> Other                     |

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 recomple 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 recomple 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 Company respectfully submits this subsequent report of final reclamation activities.

-Well Operations were completed 1/13/16.

-Any excess caliche was removed. Location was flipped, top soil was spread and re-contouring was completed.

-Reclamation was complete by reseeding location on 8/2/16.

-This well will be in monitoring status.

Thank you for your time spent reviewing this report.

|  |                                     |
|--|-------------------------------------|
| 14. I hereby certify that the foregoing is true and correct.<br><b>Electronic Submission #348387 verified by the BLM Well Information System<br/>For CONOCOPHILLIPS COMPANY, sent to the Hobbs<br/>Committed to AFMSS for processing by DEBORAH MCKINNEY on 09/01/2016 ( )</b> |                                     |
| Name (Printed/Typed) SUSAN B MAUNDER   | Title SENIOR REGULATORY COORDINATOR |
| Signature (Electronic Submission)  | Date 08/18/2016                     |

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

|   |                   |                     |
|---|-------------------|---------------------|
| Approved By <i>James A. Chino</i>   | Title <i>SAET</i> | Date <i>1-25-17</i> |
| 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 <i>CHO</i> |                     |

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 \*\*****Accepted for Record Only***MJB/ocd 2/2/2017**✓ 12-5-16 TAC*