UNITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 20

5.	Lease Serial No.
á	Lease Serial No.

SUBMIT IN TRIPLICATE - Other instructions on page 2 1. Type of Well SO DI Well Gas Well Other 2. Name of Operator CONCOOPHILIPS COMPANY E-Mail: rogens/glconcoophilips.com 9. API Well no. 30-025-40968-00-S1 3a. Address MIDLAND, TX 79710 B. Ploton No. (include area code) Ph. 432-688-9174 MALJAMAR M	Do not doo tine form for proposate to arm or Comments								6. If Indian, Allottee or Tribe Name			
1. Type of Well												
Sol Well Gas well Other EMERALD FEDERAL 1												
CONOCOPHILLIPS COMPANY E-Mail: rogers@concophillips.com 30-025-40556-00-51 30-Address B) Roman No. (include area code) Ph: 432-688-9174 10. Field and Pool or Exploratory Area MALJAMAR MIDLAND, TX 79710 11. County or Purish, State LEA COUNTY, NM 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF SUBMISSION Alter Casing Production (Start/Resume) Water Shut-Off Alter Casing Hydraulic Fracturing Reclamation Well Integrity Casing Repair New Construction Recomplete Casing Repair New Construction Plug Bank Water Disposal Convert to Injection Plug Bank Water Disposal Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated feating date of any proposed work and approximate during the treating by the Bank Water Disposal Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated feating date of any proposed work and approximate during the treating by the Bank Water Disposal or Complete on the involved operations. If the operation results in a multiple completion or recompletion in the state in ready for final inspection. CONCOPHILLIPS COMPANY WOULD LIKE TO REPORT THE ACTUAL FLARE EVENT VOLUMES ON THIS FACILITY 4/20/18-7/20/18 a LIST OF WELLS CODE TO REPORT UNDER #21 MATHER #60082001 App.18 4/23/2018 6:00am 4/27/2018 9:15am 1260 AKA Plant turnaround May-18 0 Jul-18 0 THIS SPACE FOR FEDERAL OR SUPERIOR Submission Date Office of Superior	· ·											
MIDLAND, TX 79710 4. Location of Well (Footage, Sec. T. R. M., or Survey Description) Sec 17 T17S R32E SESE 730FSL 140FEL 11. COUNTY, NM 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF SUBMISSION Acidize Deepen Alter Casing Hydraulic Fracturing Reclamation Well Integrity Subsequent Report Casing Repair New Construction Plug Back Plug and Abandon Temporarily Abandon												
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Final Abandonment Notice Change Plans Plug and Abandon Temporarily Abandon Venting and/or Flaring	_	☐ Alter Casing	☐ Hyd	raulic Fracti	uring	☐ Reclam	ation			Well Integrity		
Change Plans Plug Back Meter 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 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 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 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 and true vertical depths of all pertinent markers and zones. Attach the BLM/BIA. Required and true vertical depths of all pertinent markers and zones. Attach the BLM/BIA. Required and true vertical depths of all pertinent markers and zones. Attach the BLM/BIA. Required and true vertical depths of all pertinent markers and zones. Attach the BLM/BIA. Required and true vertical depths of all pertinent markers and zones. Attach the BLM/BIA. Required and true vertical depths of all pertinent markers and zones. Attach the provided BLM/BIA. Required and true vertical depths of all pertinent markers and zones. Attach the provided BLM/BIA. Required and true vertical depths of all pertinent markers and zones. Attach the suplicant house the pertinent pertinents in a multiple completion or recompleted and the operation state. Policy BLM/BIA. Policy BLM/BIA. Required and true vertical depths of all pertinent and zones. Attach the depths of all pertinent and zones. BLM/BIA. Policy BLM/BIA. Policy BLM/BIA. Policy BLM/BIA. Policy	Subsequent Report	□ Casing Repair	□ New	Construction	on	☐ Recomp	lete					
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Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowing the will hill to make it any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdictar SEAL File U.S.		.	crime for any pe			Anthropy to the	ke til anv ti	<i>.</i>	}			