abandoned well. Use form 3160-3 (APD) for such proposals. 6. If Indian, Allottee of Thite Name SUBMIT IN TRIPLICATE - Other instructions on reverse side. 7. If Unit or CA/Agreement, Name and Son GOLDEN SPUR 36 COM W1 2h Name of Operator CONCOPHILLIPS COMPANY Contact: ASHLEY BERGEN E-Mail: ashley.bergen@concocphilips.com 9. API Well No. 30-015-43375-00-X1 3a. Address 3b. Phone No. (include area code) Ph: 432-688-6938 10. Field and Pool, or Exploratory UNDESIGNATED 4. Location of Well (Fontage. Sec., T. R., M., or Survey Description) 11. County or Parish, and State Sec 36 T26S R31E Lot 1 315FSL 570FEL EDDY COUNTY, NM 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION ID Notice of Intent Acidize Deepen Production (Start/Resume) Water Sh Subsequent Report Casing Repair New Construction Reclamation Well Inter	B	UNITED STATES PARTMENT OF THE II UREAU OF LAND MANA NOTICES AND REPO	NTERIOR NOTOC	a S. Lease Serial NMLC068	282B
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