

OCD-ARTESIA

Form 3160-5
(August 2007)UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB No. 1004-0137
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.5. Lease Serial No.
NM703356. If Indian, Allottee or Tribe Name
N/A

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other2. Name of Operator
ConocoPhillips Company3a. Address
P.O. Box 51810
Midland, Tx 797103b. Phone No. (include area code)
432-688-69434. Location of Well (Footage, Sec., T., R., M., or Survey Description)
2240 FSL & 1200 FWL
UL: L of Section 1-22S-30E7. If Unit of CA/Agreement, Name and/or No.
N/A8. Well Name and No.
Livingston Ridge Federal # 29. API Well No.
30-015-2643610. Field and Pool or Exploratory Area
Cabin Lake Delaware11. Country or Parish, State
Eddy County, NM

12. CHECK THE 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 type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Add Pay
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water 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 recompleat 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 must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

Workover: 1/18-2/14/2008

MIRU. ND BOP. Release pkr and POOH w/production tubing. RIH w/CIBP and set at 6640'. Dump 10' cmt on top. PU arrow set # 1 pkr and new tubing and GIH to 5750. Establish injection rate. GIH w/cmt retainer to 5750' and set. Pump 25 bbls cmt. Squeeze would not hold. POOH w/tubing. Drilled out cmt retainer at 5750' and drilled down to 6500'. Tested casing and found minor leak. RIH w/ 5 1/2" cmt retainer and 2 7/8" tubing. Set retainer at 5750. Sting out retainer and spot 13 bbls cmt. Flushed w/31 bbls fresh water. Sting out of retainer and circulate hole clean. Drilled up cmt retainer at 5750. Continued drilling cmt to 5816'. Test casing. Minor drop off in 30 minutes. Squeeze held. Continue drilling out cmt to 6156'. Circulate hole clean w/2% KCl water. Perforate from 6440' to 6480' w/2spf. RIH w/pkr and tubing and set at 6363. Treat Upper perms w/2000 gls 15% HCl. Then fracture treat w/69000 gls silverstem LT + 60000# 16/30 sand. TOH w/frac string and pkr laying down tubing. Cleaned out well to PBTD. TIH w/SN and production tubing and land at 6497'. PU rods and pump. Hang on. RDMO

AFTER RECOMPLETION AND TESTING
PLEASE SUBMIT 3160-4 COMPLETION
REPORT FOR THE Brushy Canyon
INTERVAL(S) WITHIN 30 DAYS

RECEIVED

OCT 19 2010

NMOCD ARTESIA

ACCEPTED FOR RECORD

OCT 15

/s/ Roger Hall

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)
Donna Williams

Title Sr. Regulatory Specialist

Signature

Date 09/09/2010

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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.

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.

(Instructions on page 2)

Accepted for record

NMOCD DJR

Cox