

PNRM0727533273

C-103 Received 9-24-2007
DHC No. Assigned 10-2-2007

Order Number HOB-0217		API Number 30-025-38105		Operator ConocoPhillips Company		County Lea	
Order Date		Well Name SEMU		Number 174		Location	
						E UL	14 Sec
						205 T (+Dir)	37E R (+Dir)
Pool 1	63800	Weir Blinbry, East		Oil % 91%	Gas % 24%		
Pool 2	47090	Monument Tubb		5%	38%		
Pool 3	63840	Weir Drinkard		4%	38%		
Pool 4							
Comments: Work completed effective _____ Work cancelled effective _____							

Posted to
RBDMS
10-2-2007

B

DOWNHOLE COMMINGLE CALCULATIONS:

30-025-38105

HOB-0217

OPERATOR: ConocoPhillips Company

PROPERTY NAME: SEMU

WNULSTR: 174-E, 14-20-37

SECTION I:

ALLOWABLE AMOUNT

POOL NO. 1 Weir Blinebry, East

167 1070 MCF 10000

POOL NO. 2 Monument Tubb

222 2220 MCF 10000

POOL NO. 3 Weir Drinkard

142 1420 MCF 10000

POOL NO. 4 _____

POOL TOTALS 471

4710

MCF

SECTION II:

POOL NO. 1 Weir Blinebry, East

Oil

91% X 471 = 428.61

Gas

24%

POOL NO. 2 Monument Tubb

5%

38%

POOL NO. 3 Weir Drinkard

4%

38%

POOL NO. 4 _____

OIL

GAS

SECTION III:

$107 \div 91\% = 117.582 (118)$

SECTION IV:

$118 \times 91\% = 107.38 (107)$

$118 \times 5\% = 5.90 (6)$

$118 \times 4\% = 4.72 (5)$

Submit 3 Copies To Appropriate District Office

District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Ave., Artesia, NM 88210

District III

10 Rio Brazos Rd., Aztec, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised June 10, 2003

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO. 30-025-38105
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator ConocoPhillips Company		6. State Oil & Gas Lease No.
3. Address of Operator 3300 N. "A" Street Midland, TX 79705-5406		7. Lease Name or Unit Agreement Name SEMU
4. Well Location Unit Letter <u>E</u> : 2309 feet from the <u>North</u> line and <u>765</u> feet from the <u>West</u> line Section <u>14</u> Township <u>20S</u> Range <u>37E</u> NMPM County <u>LEA</u>		8. Well Number 174
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3550' GL		9. OGRID Number 217817
		10. Pool name or Wildcat Weir; Blinebry E./Monument;Tubb/Weir; Drink.

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐ CHANGE PLANS ☐

WELL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER: DOWNHOLE COMMINGLE ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Per Order #R-11363; ConocoPhillips intends to downhole commingle the NM OCD Pre-Approved Pools: Weir; Blinebry (#63800), Monument Tubb (#47090) and Weir; Drinkard (#63840)

The perforated intervals for each Pool are as follows:

Weir; Blinebry (#63800) 5595'-5856'

Monument; Tubb (#47090) 6647'-6667'

Weir; Drinkard (#63840) 6679'-6791'

Commingleing these pools will not reduce the value of the total remaining production.

The ownership working %'s between the two intervals are identical

The Bureau of Land Management has been forwarded a copy of the commingling request (BLM Form 3160-5 attached) Approved 7/19/2007

DHC Order No. HOB-0217

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Alva Franco TITLE Regulatory Specialist DATE 09/19/2007

alva.franco@conocophillips.com

Time or print name Alva Franco

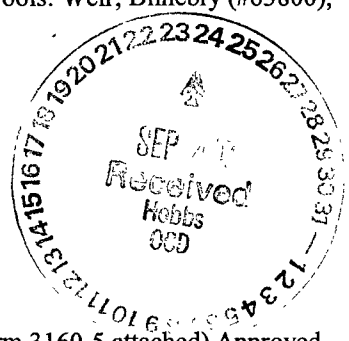
E-mail address:

Telephone No. (432)688-6906

Leave space for State use)

APPROVED BY Chris Williams TITLE DISTRICT SUPERVISOR/GENERAL MANAGER DATE SEP 27 2007

Conditions of approval, if any:



UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB No. 1004-0137
Expires: March 31, 2007

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.

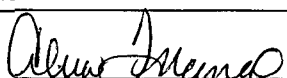
1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Serial No. NM-0557686
2. Name of Operator ConocoPhillips Company	6. If Indian, Allottee or Tribe Name
3a. Address 3300 N. "A" Street, Midland TX 79705-5406	7. If Unit or CA/Agreement, Name and/or No. NM 71041X
3b. Phone No. (include area code) (432)688-6906	8. Well Name and No. SEMU #174
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 2309' FNL & 765' FWL UL "E", Sec. 14, T-20-S, R-37-E	9. API Well No. 30-025-38105
	10. Field and Pool, or Exploratory Area Weir; Blinebry/E./Monument; Tubb/Weir; Dr
	11. County or Parish, State Lea New Mexico

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

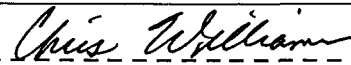
TYPE OF SUBMISSION	TYPE OF ACTION				
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off	
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> 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 Downhole	
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Commingling	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	Percentages	

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 shall 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 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.)

	OIL	WATER	GAS
East Weir; Blinebry (63800)	91%	85%	24%
Monument; Tubb (47090)	4.5%	7.5%	38%
Weir; Drinkard (61840)	4.5%	7.5%	38%

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Alva Franco		Title Regulatory Specialist
Signature 		Date 09/19/2007

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by  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.	OC DISTRICT SUPERVISOR/GENERAL MANAGER Title Office
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SEP 27 2007

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)

District I
1625 N. French Dr., Hobbs, NM 88240
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1301 W. Grand Avenue, Artesia, NM 88210
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1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-102
Revised October 12, 2005
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-025-38105		Pool Code 63800 63900		Pool Name WEIR; BLINEBRY EAST	
Property Code 31670		Property Name SEMU			Well Number 174
OGRID No. 217817		Operator Name CONOCOPHILLIPS CO.			Elevation 3550

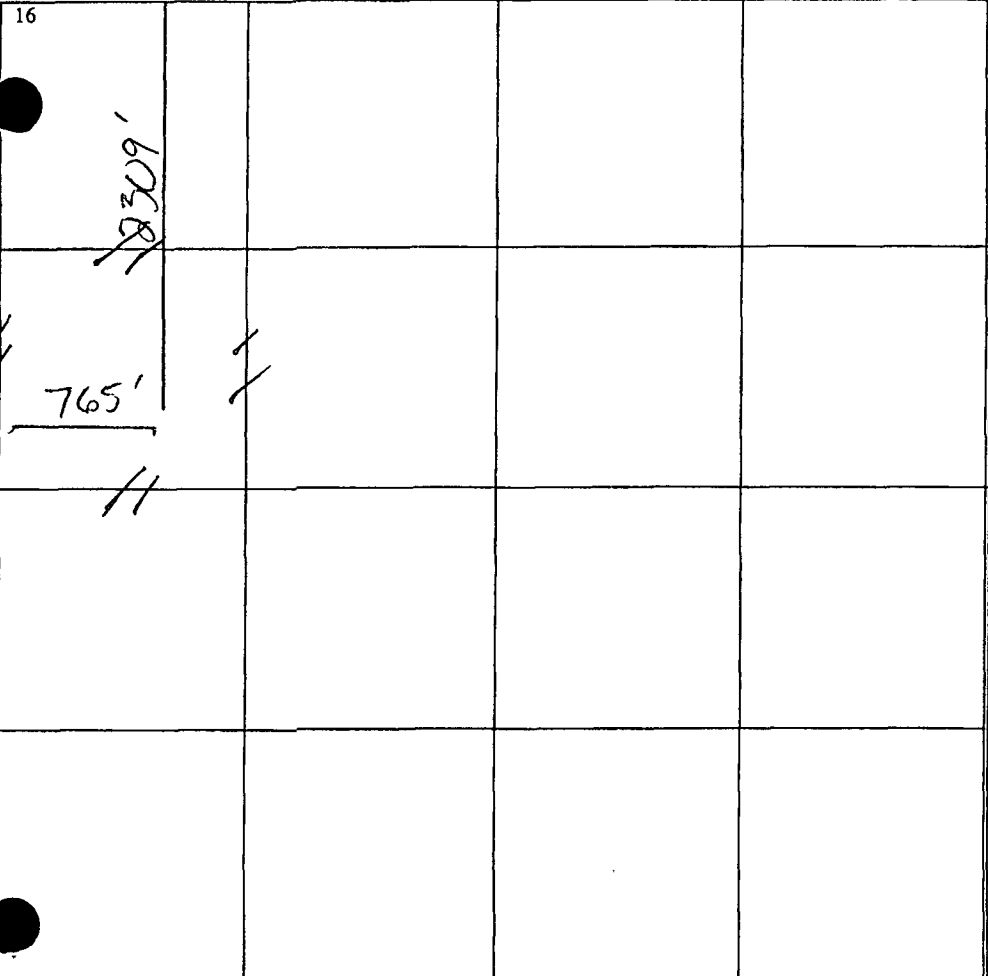
¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	14	20S	37E		2309	NORTH	765	WEST	LEA

¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Dedicated Acres 40		Joint or Infill		Consolidation Code		Order No.			

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

<div>16</div> 	<div>17 OPERATOR CERTIFICATION</div> <p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.</p> <p><i>Deborah Marberry</i> Signature Date 7/24/06</p> <p>DEBORAH MARBERRY Printed Name</p>	
	<div>18 SURVEYOR CERTIFICATION</div> <p>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</p>	
	Date of Survey Signature and Seal of Professional Surveyor:	
	Certificate Number	

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WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-025-38105		Pool Code 47090	Pool Name MONUMENT;TUBB
Property Code 31670	Property Name SEMU		Well Number 174
OGRID No. 217817	Operator Name CONOCOPHILLIPS CO.		Elevation 3550

¹⁰ Surface Location

UL or lot no. E	Section 14	Township 20S	Range 37E	Lot Idn	Feet from the 2309	North/South line NORTH	Feet from the 765	East/West line WEST	County LEA
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¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
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" Dedicated Acres 80	" Joint or Infill	" Consolidation Code	" Order No.
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No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

<div>16</div> <div>2309'</div> <div>765'</div>					<div>¹⁷ OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division. <div>Signature: <i>Deborah Marberry</i> Date: 7/24/06</div><div>DEBORAH MARBERRY</div><div>Printed Name</div></div>	
						<div>¹⁸ SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief. <div>Date of Survey</div><div>Signature and Seal of Professional Surveyor:</div></div>
						<div>Certificate Number</div>

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WELL LOCATION AND ACREAGE DEDICATION PLAT

' API Number 30-025-38105	' Pool Code 63840	' Pool Name WEIR, DRINKARD
' Property Code 31670	' Property Name SEMU	' Well Number 174
' OGRID No. 217817	' Operator Name CONOCOPHILLIPS CO.	' Elevation 3550

¹⁰ Surface Location

UL or lot no. E	Section 14	Township 20S	Range 37E	Lot Idn	Feet from the 2309	North/South line NORTH	Feet from the 765	East/West line WEST	County LEA
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¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
" Dedicated Acres 2.0	" Joint or Infill	" Consolidation Code	" Order No.						

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

16	2309'	765'				¹⁷ OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division. Signature: Deborah Marberry Date: 7/24/06 DEBORAH MARBERRY Printed Name
						¹⁸ SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief. Date of Survey Signature and Seal of Professional Surveyor: Certificate Number