

API#30-025-39115 DHC-HOB-

<b>DOWNHOLE COMMINGLE CALCULATIONS:</b>		
OPERATOR: Conoco Phillips Co		
PROPERTY NAME: Lockhart A. 27		
WNULSTR: 26-4, 27-215-37e	-	
SECTION I: 206660 POOL NO. 1 Rinebry DOG LOID	ALLOWABLE AMOUNT <u>107</u> <u>428</u> MCF	4000
	• • • • • • • • • • • • • • • • • • •	
POOL NO. 2 TUBB DDG G <dily< td=""><td>142 284 MCF</td><td>2000</td></dily<>	142 284 MCF	2000
POOL NO. 3 DRINKand	142 852MCF	6000
POOL NO. 4	MCF ALS 391 1564	
FOOL IOI	TALS $\overline{391}$ $\overline{1564}$ $D_1 \setminus$	GAS
SECTION II: POOL NO. 1 Brinebry D&G LOID		52%
POOL NO. 2 TUDE DOG LOID	25%	23%
pool NO. 3 Drinhard	30% 1391 = 117	3 25%
POOL NO. 4		
OIL	GAS	
SECTION III: 1424 3070 = 473.33 (473)		
SECTION IV: $473 \times 48\% = 227$ $473 \times 25\% = 118$ $473 \times 30\% = 118$ $413 \times 30\% = 141.9 < 142$		

Submit 3 Copies 10 Appropriate District Office <u>District I</u> 1625 N French Dr., Hobbs, NM 88240	State of New Mexico Energy, Minerals and Natural Resources	Form C-103 June 19, 2008 WELL API NO.
	Salita PC, NW 87505	30-025-39115 5. Indicate Type of Lease STATE FEE Feed 6. State Oil & Gas Lease No. N/A
SUNDRY NOTIO (DO NOT USE THIS FORM FOR PROPOS DIFFERENT RESERVOIR USE "APPLIC PROPOSALS ) 1. Type of Well: Oil Well	CES AND REPORTS ON WELLS ALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A ATION FOR PERMIT" (FORM C-101) FOR SUCH Gas Well Øther	7. Lease Name or Unit Agreement Name     Lockhard A-27     8. Well Number # 26
<ol> <li>Name of Operator ConocoPhillips Company</li> <li>Address of Operator</li> </ol>	/ :	9. OGRID Number 217817 / 10. Pool name or Wildcat Blinebry O&G
P.O. Box 51810 Midland, Tx 79710		Tubb O&G Drinkard
4. Well Location Unit Letter <u>H</u> : Section 27	1650 feet from the North line and Township 21S Range 37E	330 feet from the East line NMPM Lea County
	11. Elevation (Show whether DR, RKB, RT, GR, etc 3397' GR	2.)

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING DOWNHOLE COMMINGLE		SUBSEQUENT REPORT OF: REMEDIAL WORK							
		OTHER:							
B. 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-1163, ConocoPhillips intends to downhole comming the NM OCD Pre-Approved Pools: Blinebry O&G, Tubb O&G, and Drinkard.

The perforated i	ntervals and	l allocations f	or each pool	are as follows:	Perfs
Blinebry				(66660)	5262-5810
Tubb	25% oil	29% water	23% gas	(40240)	5990-6182
Drinkard	27% oil	30% water	25% gas	(19190)	6452-6565

Commingling of these pools will not reduce the value of the total remaining production. The ownership working % between the intervals are identical.

DHC. HOB. 0320 0329
Spud Date: Rig Release Date:
I hereby certify that the information above is true and complete to the best of my knowledge and belief.
SIGNATURE Donna.J.Williams@ TITLE Conocophillips.com 10 2009 ATE 7/1/2009
PETROLFIMMENCHINGER JUL . 0 2007

0220

Do not use this form for proposals to drill or to re-enterabandoned well. Use Form 3160 - 3 (APD) for such proposals         SUBMIT IN TRIPLICATE- Other instructions on reverses         1       Type of Well         ✓ Od Well       Gas Well         ✓ Od Well       Gas Well         ✓ Od Well       Other         2       Name of Operator ConocoPhillips Company         3a       Address         P.O. Box 51810 Midland, Tx 79710       3b Phone No (include area         4       Location of Well (Footage, Sec, T, R, M, or Survey Description)         1650 FNL & 330 FEL       SENE of 27-21S-37E         12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE CO	Side.       7. If Unit or CA/Agreement, Name and/or No         side.       7. If Unit or CA/Agreement, Name and/or No         8. Well Name and No.       Lockhart A-27 # 26         9 API Well No.       30-025-39115         10 Field and Pool, or Exploratory Area       Blineb         Tubb O&G Drinkard       11 County or Parish, State         Lea County, NM       DF NOTICE, REPORT, OR OTHER DATA .         DF ACTION       Water Shut-Off         Production (Start/Resume)       Water Shut-Off         Reclamation       Well Integrity         Recomplete       Ø Other         DHC       Temporarily Abandon         Water Disposal       d starting date of any proposed work and approximate duration thereof
Do not use this form for proposals to drill or to re-enterabandoned well. Use Form 3160-3 (APD) for such proposals         SUBMIT IN TRIPLICATE- Other instructions on reverse s         I Type of Well         I Type of Well         I Type of Operator         ConocoPhillips Company         3a Address         P.O. Box 51810 Midland, Tx 79710         3b Phone No (include area         432-688-6943         4 Location of Well (Footage, Sec, T, R, M, or Survey Description)         1650 FNL & 330 FEL         SENE of 27-21S-37E         12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE C         TYPE OF SUBMISSION         Subsequent Report         Casing Repair         New Construction         Final Abandonment Notice         Final Abandonment Notice         13 Describe Proposed or Completed Operation (clearly state all pertunent details, including estimatec         If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and	ar of C 2009 if indian, Allottee of Tribe Name         OBBSOCD         side.         7. If Unit or CA/Agreement, Name and/or No         8. Well Name and Na         Lockhart A-27 # 26         9 API Well No.         a code)         10 Field and Pool, or Exploratory Area         Blineb         Tubb O&G Drinkard         11 County or Parish, State         Lea County, NM         OF NOTICE, REPORT, OR OTHER DATA .         OF ACTION         Production (Start/Resume)         Water Shut-Off         Reclamation         Well Integrity         Recomplete         Yother         DHC         Temporarily Abandon         Water Disposal         d starting date of any proposed work and approximate duration thereof         d measured and true vertical depths of all pertunent markers and zones
SUBMIT IN TRIPLICATE- Other instructions on reverse s         1       Type of Well       Gas Well       Other         2       Name of Operator ConocoPhillips Company         3a       Address       3b       Phone No (include areal 432-688-6943)         4       Location of Well (Footage, Sec, T, R, M, or Survey Description)       1650 FNL & 330 FEL SENE of 27-21S-37E         12.       CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF TYPE OF SUBMISSION       TYPE OF         12.       CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF CONSTRUCTION         1650 FNL & 330 FEL       SENE of 27-21S-37E         12.       CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF CONSTRUCTION         1650 FNL & 300 FEL       Subsequent Report         12.       CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF CONSTRUCTION         13       Describe Proposed or Completed Operation (clearly state all pertunent details, including estimated if the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and	side.       7. If Unit or CA/Agreement, Name and/or No         8. Well Name and No.       Lockhart A-27 # 26         9       API Well No.         a code)       30-025-39115         10       Field and Pool, or Exploratory Area         Blineb       Tubb O&G Drinkard         Tubb O&G Drinkard       11         County or Parish, State       Lea County, NM         DF NOTICE, REPORT, OR OTHER DATA .       DF ACTION         Production (Start/Resume)       Water Shut-Off         Reclamation       Well Integrity         Recomplete       Ø Other         Ø Other       DHC         Temporarily Abandon       Water Disposal         d starting date of any proposed work and approximate duration thereof       d measured and true vertical depths of all pertunent markers and zones
Image: Construction of Well       Gas Well       Other         2 Name of Operator ConocoPhillips Company       3b Phone No (include area 432-688-6943         3a Address       Box 51810 Midland, Tx 79710       3b Phone No (include area 432-688-6943         4 Location of Well (Footage, Sec, T, R, M, or Survey Description)       1650 FNL & 330 FEL SENE of 27-21S-37E         12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF SUBMISSION       TYPE OF         Image: Construction of Intent       Acidize       Deepen         Image: Subsequent Report       Casing Repair       New Construction         Image: Final Abandonment Notice       Convert to Injection       Plug Back         13 Describe Proposed or Completed Operation (clearly state all pertunent details, including estimated if the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and	Lockhart A-27 # 26         9 API Well No.         30-025-39115         10 Field and Pool, or Exploratory Area         Blineb         Tubb O&G Drinkard         11 County or Parish, State         Lea County, NM         DF NOTICE, REPORT, OR OTHER DATA .         DF ACTION         Production (Start/Resume)         Water Shut-Off         Reclamation         Well Integrity         Recomplete         I Other DHC         Temporarily Abandon         Water Disposal         d starting date of any proposed work and approximate duration thereof         d measured and true vertical depths of all pertunent markers and zones
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TYPE OF SUBMISSION       TYPE O         Image: Subsequent Report       Image: Acidize       Image: Deepen       Image: Casing Repair       Image: Deepen       Image: Casing Repair       Image: Casin	DF NOTICE, REPORT, OR OTHER DATA . DF ACTION Production (Start/Resume) Water Shut-Off Reclamation Well Integrity Recomplete I Other DHC Temporarily Abandon Water Disposal d startung date of any proposed work and approximate duration thereof d measured and true vertical depths of all pertunent markers and zones
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Acidize       Deepen         Notice of Intent       Alter Casing         Subsequent Report       Casing Repair         Final Abandonment Notice       Convert to Injection         Plug Back       Plug Back         13 Describe Proposed or Completed Operation (clearly state all pertunent details, including estimated If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and	Production (Start/Resume)       Water Shut-Off         Reclamation       Well Integrity         Recomplete       ✓ Other DHC         Temporarily Abandon
<ol> <li>Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and</li> </ol>	d starting date of any proposed work and approximate duration thereof d measured and true vertical depths of all pertinent markers and zones
determined that the site is ready for final inspection )Per Order R-1163, ConocoPhillips intends to downhole comming the NM OCD Pre Drinkard.The perforated intervals and allocations for each pool are as follows: Blinebry 48% oil 41% water 52% gas Tubb 25% oil 29% water 23% gas Drinkard 27% oil 30% water 25% gasCommingling of these pools will not reduce the value of the total remaining produc The ownership working % between the intervals are identical.	
14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) <b>Ponna Williams</b> Title Sr. Rep	
Signature Date	07/01/2009
THIS SPACE FOR FEDERAL OR STAT	TE OFFICE USE
A provide L	Date
Approved by Title 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 Office Office	
which would entitle the applicant to conduct operations thereon Title 18 USC Section 1001 and Title 43 USC. Section 1212, make it a crime for any person knowing States any false, fictitious or fraudulent statements or representations as to anymatter within its juris	igly and willfully to make to any department or agency of the United
(Instructions on page 2)	

District I			State of New Mexico									C-102
1625 N. French Dr	., Hobbs, NA	M 88240	1 88240 Energy, Minerals & Natural Resources Department								October 12	2, 2005
District II 1301 W. Grand Avenue, Artesia, NM 8 <b>RECEIVED</b> CONSERVATION DIVISION Submit to Appropriate Dist									ate District	Office		
Die till State Lease -										Lease - 4	Copies	
1 Brazos R	d., Aztec, NI	vi 87410 J	UL 10	2009 12						Fee	Lease - 3	Copies
District IV			BRS	OCO	Santa F	e, M	M 87505		r			
District IV 1220 S. St. Francis	Dr., Santa I	e, NM 87503	JOUV			_			_ L		NDED RE	EPORT
		W.	ELL LC			ACR	EAGE DEDIC					
7	API Numbe	r		<sup>2</sup> Pool Code								
30-025-39115			0	0240	$\overline{)}$			TUBB O&	.G			
Property C 3764	1					perty N (HART		/		۰v	Vell Number # 26	
OGRID	No.				<sup>8</sup> Ope	erator N	Name /				Elevation	
217817					CONOCOPH	OLLIPS	COMPANY				3397 GR	
					<sup>10</sup> Surf	ace I	Location					
UL or lot no.	Section	Township	Range	Lot Idn	Feet fro	m the	North/South line	Feet from the	East/	West line		County
H	27	21S	37E		1650		NORTH	330	EAS	r	LEA	
<sup>11</sup> Bottom Hole Location If Different From Surface												
UL or lot no.	Section	Township	Range	Lot Idn	Feet fro	m the	North/South line	Feet from the	East/	West line		County
<sup>12</sup> Dedicated Acre	s <sup>13</sup> Joint o	or Infill 14 Co	onsolidation	Code 15 Or	der No.					I		
40												

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				<sup>17</sup> 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, of to avoluntary pooling agreement or a compulsory pooling
			1 1 1 1 1	order heretofore entered by the division.
				7/6/2009
•				Signature Date
			Γ X	
4			- 1	Donna Williams
			_	Printed Name
			-	-
		-		-
				<sup>18</sup> 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
				Signature and Sea of Froiessional Surveyor
-				
				Certificate Number
	I			

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District [					State of N	ew Mexico				Form C-102	
1625 N. French Dr	., Hobbs, NI		<sup>88</sup> RECEIVED Minerals & Natural Résources Department NM 88210 Revised October 12, Submit to Appropriate District CONSERVATION DIVISION								
1301 W. Grand Av	venue Artesi	NM 88210	3 <b></b>   V	<b>C</b> HIC	ONSERVA	ATION DIVISIO	N	Submit to	Appropria	ate District Office	
Part III			10 20	<i>i</i>			1		State	e Lease - 4 Copies	
	d., Aztec, NI	<b>M 87410</b>			220 South S	St. Francis Dr.			Fee	e Lease - 3 Copies	
District IV		HOB	BSOC	D	Santa Fe,	NM 87505				1	
1220 S. St. Francis	Dr., Santa I								🗌 AME	ENDED REPORT	
		W	ELL LO	OCATIO	N AND AC	CREAGE DEDIC	CATION PLA	ΑT			
<u>_</u>	API Numbe	r		<sup>2</sup> Pool Code	e		<sup>3</sup> Pool N	ame			
30-025-39115				19190	ר ר		DRINKARD				
<sup>4</sup> Property (	Code				5 Proper	ty Name			61	Well Number	
3764	e (				LOCKHA	ART A-27				# 26	
OGRID I	No.				<sup>8</sup> Operat	tor Name				Elevation	
217817					CONOCOPHILI	JPS COMPANY				3397 GR	
````					<sup>10</sup> Surfac	e Location					
UL or lot no.	Section	Township	Range	Lot Idn	Feet from	the North/South line	Feet from the	Eas	t/West line	County	
H	27	21S	37E		1650	NORTH	330	EA	ST	LEA	
			<sup>11</sup> Bo	ottom Ho	le Location	If Different From	m Surface	·			
UL or lot no.	Section	Township	Range	Lot Idn	Feet from 1	the North/South line	Feet from the	Eas	t/West line	County	
<sup>12</sup> Dedicated Acre	s <sup>13</sup> Joint o	r Infill 14 C	onsolidation	Code 15 O	rder No.		L	<b>1</b>			
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	1										

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			<sup>17</sup> 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.
			7/6/2009
			Signature Date
		+ x	Signature Date
			Donna Williams
			Printed Name
		+	+
		-	
1			
			<sup>18</sup> 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
1			Signature and Seal of Professional Surveyor
-			
			Conferm No. 1
			Certificate Number
	l		H

District I			State of New Mexico Form							
1625 N. French Dr., Hobbs, NM 88240       Revised October 12, 20         District II       Submit to Appropriate District Off										October 12, 2005
									te District Office	
1301 W. Grand Avenue, Artesia, NM 88210 UTL / CATINDEAN VALITOIN DI VIDIOIN										Lease - 4 Copies
JUL 10 2000 1220 South St. Francis Dr.										Lease - 3 Copies
District IV	a., Aztec, N	۷۱۵/410 السا	<b>JBBS</b>	DCD	Santa Fe	NM 87505			гее	Lease - 5 Copies
1220 S. St. Francis	Dr., Santa I	Fe, NM 87505	JUDA	<i></i>	Sunta i O,	1 (1)1 0 1 0 0 0			□ ame	NDED REPORT
	,	,				CREAGE DEDI		۸T		
T						CREAGE DEDI	CATION FLA Pool N		·	······
30-025-39115	API Numbe	r	ļ ,		e					
			$\omega$	660			BLINEBRY	<u>( 0&amp;G</u>	6	
<sup>4</sup> Property	Code					rty Name			° W	ell Number/
3764	{\					ART A-27				# 26
OGRID	No.				<sup>8</sup> Opera	tor Name			9	Elevation
217817					CONOCOPHIL	LIPS COMPANY				3397 GR
			,		<sup>10</sup> Surfac	ce Location				
UL or lot no.	Section	Township	Range	Lot Idn	Feet from	the North/South line	e Feet from the	Eas	t/West line	County
H	27	21S	37E		1650	NORTH	330	EA	ST	LEA
· · · · · · · · · · · · · · · · · · ·			<sup>11</sup> Bo	ottom Ho	le Location	n If Different Fro	m Surface			
UL or lot no.	Section	Township	Range		Feet from			Eas	t/West line	County
12 Dedicated Acro	es Joint	or Infill	L Consolidation	Code <sup>15</sup> O	rder No.		1,,	1	,I.	
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1										

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			<sup>17</sup> 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 coluntary pooling agreement or a compulsory pooling
			order heretofore intered by the division
			7/6/2009
	<u> </u>		thur
		- v -	Signature Date
		- X	- Donna Williams
			Printed Name
		-	-
	-		
			<sup>18</sup> SURVEYOR CERTIFICATION
			l 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