

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division
811 S. 1st Street
Artesia, NM 88210-2834

FORM APPROVED
Bureau No. 1004-0135
Expires: March 31, 1993

C15P

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT-" for such proposals

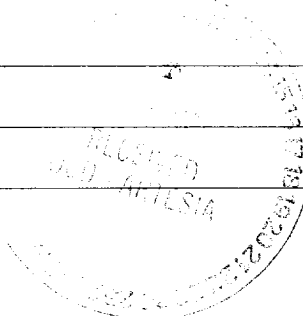
SUBMIT IN TRIPLICATE

1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
CONCHO RESOURCES INC. /

3. Address and Telephone No.
110 W. LOUISIANA STE 410; MIDLAND, TX 79701 (915) 683-7443

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1980' FNL & 660' FWL, SEC. 17, 18S, 31E.



5. Lease Designation and Serial No.
LC 029393-B

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
West Shugart '17' Federal #1

9. API Well No.
3001531505

10. Field and Pool, or Exploratory Area
Shugart Bone Spring North

11. County or Parish, State
EDDY, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other set csg	<input type="checkbox"/> Dispose Water

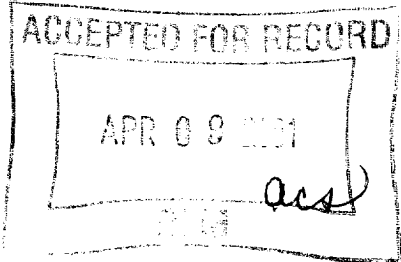
(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

3/19/01 RIH w/ 8-5/8" csg & set @ 2827'. Cmt w/ lead: 480 sx 50/50 POZ C + additives; tailed w/ 200 sx C + 2% CC. Circ 90 sx to pit. WOC 18 hrs.

4/01/01 RIH w/ 5-1/2" csg & set @ 8732'. Cmt w/ lead: 200 sx 50/50 POZ C + additives; tailed w/ 1000 sx 50/50 POZ C + additives.

04/02/01 Release Rig @ 1:00 AM.



14. I hereby certify that the foregoing is true and correct

Signed [Signature] Title Production Analyst Date 04/03/01

(This space for Federal or State office use)

Approved by [Signature] Title Date

Conditions of approval, if any:

RECEIVED
2001 APR -4 AM 8:39
FEDERAL BUREAU OF INVESTIGATION
POSTAL OFFICE