Form 3160-5 (August 2007)

## DEPARTMENT OF THE INTERIOR UNITED STATES

FORM APPROVED OMB No. 1004-0137 Expires: July 31, 2010

BUREAU OF LAND MANAGEMENT

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. NMLC031670B 6. If Indian, Allottee or Tribe Name

| abandoned well.  | Use Form 3160-3 (A   | (PD) for su                        | cn proposals                      | IAFD.   |   |                                  |                        |            |
|--|--|------------------------------------|-----------------------------------|---|---|----------------------------------|------------------------|------------|
| SUBMIT IN TRIPLICATE – Other instructions on page 2.   |  |                                    |                                   |   | 7. If Unit of CA/Agreement, Name and/or No. |                                  |                        |            |
| 1. Type of Well  |  |                                    |                                   |   | Warren Unit 8. Well Name and No.            |                                  |                        |            |
| X Oil Well Gas Well Other ,  |  |                                    |                                   |   | Warren Unit 396                             |                                  |                        |            |
| 2. Name of Operator ConocoPhillips Company   |  |                                    |                                   |   | 9. API Well No. 30-025-40287                |                                  |                        |            |
| 3a. Address 3b. Phone No. (include area code)  |  |                                    |                                   |   | 10. Field and Pool or Exploratory Area      |                                  |                        |            |
| 3300 N "A" St Midland TX 79705   |  | (4,32)688-9174                     |                                   |   | Warren; Blinebry-Tubb                       |                                  |                        |            |
| 4. Location of Well (Footage, Sec., T., UL: M, 380' FSL & 1230' F  | )<br>E /   |                                    |                                   | 1-1. Country or Parish, State                           |   |                                  |                        |            |
|  |  |                                    |                                   |   | Lea / NM /                                  |                                  |                        |            |
| 12. CHEC   | K THE APPROPRIATE BO   | X(ES) TO IND                       | ICATE NATURE                      | OF NOTIC  | CE, REPORT OR OT                            | HER DATA                         |                        |            |
| TYPE OF SUBMISSION   |  | TYP                                | E OF ACT                          | ION   |   |                                  |                        |            |
| Notice of Intent   | Acidize  | $=$ $\cdot$                        | Deepen                            |   | action (Start/Resume)                       | · =                              |                        |            |
|  | Alter Casing   | Fracture Treat                     |                                   | Reclamation   |   | Well Integrity                   |                        | 4          |
| X Subsequent Report  | Casing Repair  | _                                  | New Construction                  |   | mplete                                      | X Other Spud report              |                        | π          |
| Change Plans   Convert to Injection  |  | Plug                               | and Abandon<br>Back               | _ `   | oorarily Abandon<br>r Disposal              |                                  |                        |            |
| tan-a-i  |  |                                    |                                   | e of any proposed work and approximate duration thereon |   |                                  | pereof If              |            |
| testing has been completed. Final determined that the site is ready for 12/24/11 MIRU Precision 1 55 csg & set @ 1489' w/13 12/27/11 Pre-flush w/20 bb plug to 1300#. Circ 60 bbls 12/28/11 PT csg to 1000#/ | final inspection.) 94. 12/26/11 Spud vocents. Ils FW & pump 600 secont to surf. NUBO 30 mins - held. | vell w/12 1/4<br>x class C le<br>P | 4" bit & drill to                 | 1500' 1;  | ACCEPTI                                     | /34 jts, 8 5/8"<br>p w/91 bbls F | ', 24#, JW. Bump RECOR | p<br>      |
| 14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)  |  |                                    |                                   |   |   |                                  |                        |            |
| Rhonda Rogers  |  |                                    | Title Staff Regulatory Technician |   |   |                                  |                        |            |
| Signature Shorter Dolls  |  |                                    | Date 01/04/2012                   |   |   |                                  |                        |            |
|  | THIS SPACE   | FOR FEDE                           | RAL OR STA                        | TE OFF  | ICE USE                                     |                                  |                        |            |
| Approved by  |  |                                    | Title PETER                       | <b>M</b> LLIM   | Emanasa                                     | Date JAN                         | 1 9 20                 | ) 12       |
| Conditions of approval, if any, are attached that the applicant holds legal or equitable ti entitle the applicant to conduct operations t  | ertify   | 1                                  | (A)                               |   |   |                                  |                        |            |
| Title 18 U.S.C. Section 1001 and Title 43 the fictitious or fraudulent statements or representations.  |  |                                    | • • •                             | l willfully to  | make to any departme                        | nt or agency of the              | United States          | any false, |

(Instructions on page 2)

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