

Order Number

HOB
0309

API Number

30-025 07832

Operator

Conoco Phillips Co

County

Lea

Order Date

4/21/09

Well Name

SEML

Number

50

Location

K

UL

20

Sec

20s

T (+Dir)

38e

R (+Dir)

Pool 1

06660

Blinberry O&G <Oil>

Oil %

25.00%

Gas %

25.00%

Pool 2

63280

Warren Tubb <Oil>

75.00%

75.00%

Pool 3

Pool 4

Comments

05/21/09 RBOMS dm

DOWNHOLE COMMINGLE CALCULATIONS:

30-025-07832

OPERATOR: Conoco Phillips Co

PROPERTY NAME: SEMU

WNULSTR: *50-K, 20-2129-38E

SECTION I: <06660>

POOL NO. 1 Blinberry D4G <0.1>

ALLOWABLE AMOUNT

107 428 MCF 4000 0/0

POOL NO. 2 Warren Tubb <0.1>

142 284 MCF 2000 0/0

POOL NO. 3 _____

_____ MCF

POOL NO. 4 _____

_____ MCF

POOL TOTALS 249

SECTION II:

POOL NO. 1 Blinberry D4G

0.1

25%

GAS

25%

POOL NO. 2 Warren Tubb

75% x 249 = 186.75

75%

POOL NO. 3 _____

<187>

POOL NO. 4 _____

OIL

GAS

SECTION III:

$142 \div 75\% = 183.333 <183>$

SECTION IV:

$183 \times 75\% = 9.75 <10>$

$183 \times 25\% = 45.75 <46>$

$142 \times 25\% = 35.5 <36>$

$142 \times 75\% = 106.5 <107>$

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD HOBBS

FORM 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
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
ConocoPhillips Company

3a. Address
P.O. Box 51810 Midland, Tx 79710

3b. Phone No. (include area code)
423-688-6943

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1980 FSL & 660 FWL
NWSW of 20-20S-38E

5. Lease Serial No
LC031670B

6. If Indian, Allottee or Tribe Name
N/A

7. If Unit or CA/Agreement, Name and/or No

8. Well Name and No.
SEMU # 50

9. API Well No
30-025-07832

10. Field and Pool, or Exploratory Area
Blinbry O&G and Warren Tubb

11. County or Parish, State
Lea County, NM

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

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|--|---|---|--|--|
| <input checked="" 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 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 | Commingle |
| | <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.)

Per Order # R-1163, ConocoPhillips intends to downhole commingle the NM OCD Pre-Approved Pools: Blinbry O&G (6660) and Warren Tubb (63280).

The perforated intervals and allocations for each pool are as follows:

| | | | |
|---------------------|---------|---------|-------------------|
| Blinbry O&G (6660) | 25% Oil | 25% Gas | Perfs 5840 - 6320 |
| Warren Tubb (63280) | 75% Oil | 75% Gas | Perfs 6430 - 6615 |

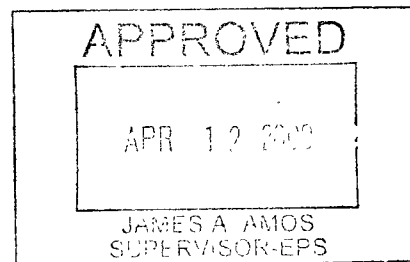
Commingle of these pools will not reduce the value of the total remaining production.
The ownership working % between the two intervals are identical.

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DAC-HOB-0309



14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Donna Williams

Title Sr. REgulatory Specialist

Signature

Date

03/25/2009

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.

Office

KZ

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 88241
District II
1301 W. Grand Avenue, Artesia, NM 88201
District III
Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

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MAY 18 2009

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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

| | | |
|---|--|---------------------------------------|
| ¹ API Number 30-025-07832 | ² Pool Code 6660 | ³ Pool Name Blinbry O&G |
| ⁴ Property Code | ⁵ Property Name SEMU | ⁶ Well Number 50 |
| ⁷ OGRID No. 217817 | ⁸ Operator Name ConocoPhillips Company | ⁹ Elevation |

¹⁰ Surface Location

| | | | | | | | | | |
|--------------------|---------------|-----------------|--------------|---------|-----------------------|---------------------------|----------------------|------------------------|---------------|
| UL or lot no. L | Section 20 | Township 20S | Range 38E | Lot Idn | Feet from the 1980 | North/South line South | Feet from the 660 | East/West line West | County 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 |
| ¹² Dedicated Acres 40 | ¹³ Joint or Infill | ¹⁴ Consolidation Code | ¹⁵ 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.

| | | | |
|--|---|--|--|
| | ¹⁷ OPERATOR CERTIFICATION <i>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</i> Signature _____ Date 5/12/09 Donna Williams Printed Name | | |
| | ¹⁸ SURVEYOR CERTIFICATION <i>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</i> Date of Survey _____ Signature and Seal of Professional Surveyor _____ | | |
| | Certificate Number _____ | | |
| | | | |

District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Avenue, Artesia, NM 88210

District III

Rio Brazos Rd., Aztec, NM 87410

District IV

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

State of New Mexico

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

| | | |
|---|--|---------------------------------------|
| ¹ API Number 30-025-07832 | ² Pool Code 63280 | ³ Pool Name Warren Tubb |
| ⁴ Property Code | ⁵ Property Name SEMU | ⁶ Well Number 50 |
| ⁷ OGRID No. 217817 | ⁸ Operator Name ConocoPhillips Company | ⁹ Elevation |

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 |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| L | 20 | 20S | 38E | | 1980 | South | 660 | 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 |
|---------------|---------|----------|-------|---------|---------------|------------------|---------------|----------------|--------|
| | | | | | | | | | |

| | | | |
|-------------------------------------|-------------------------------|----------------------------------|-------------------------|
| ¹² Dedicated Acres 40 | ¹³ Joint or Infill | ¹⁴ Consolidation Code | ¹⁵ 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 style="position: relative; height: 460px;"> <div style="position: absolute; top: 10px; left: 10px;">16</div> </div> | ¹⁷ OPERATOR CERTIFICATION <i>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</i> <div style="text-align: right;">5/12/09</div> <div style="display: flex; justify-content: space-between;"> <div>Signature</div> <div>Date</div> </div> <div style="border-top: 1px solid black; padding-top: 5px;"> Donna Williams Printed Name </div> |
| | ¹⁸ SURVEYOR CERTIFICATION <i>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</i> <div style="border-top: 1px solid black; padding-top: 5px;">Date of Survey</div> <div style="border-top: 1px solid black; padding-top: 5px;">Signature and Seal of Professional Surveyor</div> |
| | <div style="border-top: 1px solid black; padding-top: 5px;">Certificate Number</div> |