

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010

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.
NMLC064756

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on reverse side

MAY 16 2016
RECEIVED
ARTESIA DISTRICT

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other2. Name of Operator
CONOCOPHILLIPSContact: ASHLEY BERGEN
E-Mail: ashley.bergen@conocophillips.com8. Well Name and No.
RAMBLIN ROSE 14 FEDERAL 19. API Well No.
30-015-417963a. Address
P.O BOX 51810
MIDLAND, TX 797103b. Phone No. (include area code)
Ph: 432-688-693810. Field and Pool, or Exploratory
JENNINGS; BONE SPRING

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 14 T26S R31E Mer NMP SWNW 1810FNL 820FWL

11. County or Parish, and State

EDDY 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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Successor of Operator
	<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 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.)

ConocoPhillips will obtain the Ramblin Rose 14 Federal 1H from EOG and resume operations once the change of operator is approved by the NMOCD. The application was submitted to the NMOCD on 5/4/16.

Does not follow NTL 89-1
Does not have a change effective date

Accepted for record
NMOCD AB
5/11/16

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #338399 verified by the BLM Well Information System For CONOCOPHILLIPS, sent to the Carlsbad Committed to AFMSS for processing by PRISCILLA PEREZ on 05/04/2016	
Name (Printed/Typed) ASHLEY BERGEN	Title REGULATORY SPECIALIST
Signature (Electronic Submission)	Date 05/04/2016
THIS SPACE FOR FEDERAL OR STATE OFFICE USE	
REJECTED	
Title LLE	
Office Carlsbad	
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.	
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.	

ACCEPTED FOR RECORD
MAY - 6 2016
BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **