

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCD
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.
NMNM0479142

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

8. Well Name and No.
JAMES E FEDERAL 4

9. API Well No.
30-015-26371-00-S1

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
CONOCOPHILLIPS COMPANY

Contact: RHONDA ROGERS
E-Mail: rogers@conocophillips.com

3a. Address
MIDLAND, TX 79710 1810

3b. Phone No. (include area code)
Ph: 432-688-9174.

10. Field and Pool, or Exploratory
CABIN LAKE

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 11 T22S R30E NENE 760FNL 330FEL

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 | Venting and/or Flaring |
| | <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 recomplete 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 recompletion 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 Company would like to flare/vent because DCP maintenance at Cabin Lake. Event through January 24, 2016.

Attached is a list of wells
Attached is a site diagram

NM OIL CONSERVATION
ARTESIA DISTRICT
NOV 19 2015

SEE ATTACHED FOR
CONDITIONS OF APPROVAL

LRD 11/20/15
Accepted for record
NMOCD

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

Electronic Submission #321389 verified by the BLM Well Information System
For CONOCOPHILLIPS COMPANY, sent to the Carlsbad
Committed to AFMSS for processing by JENNIFER SANCHEZ on 10/29/2015 (16JAS0841SE)

Name (Printed/Typed) RHONDA ROGERS Title STAFF REGULATORY TECHNICIAN

Signature (Electronic Submission) Date 10/26/2015

APPROVED

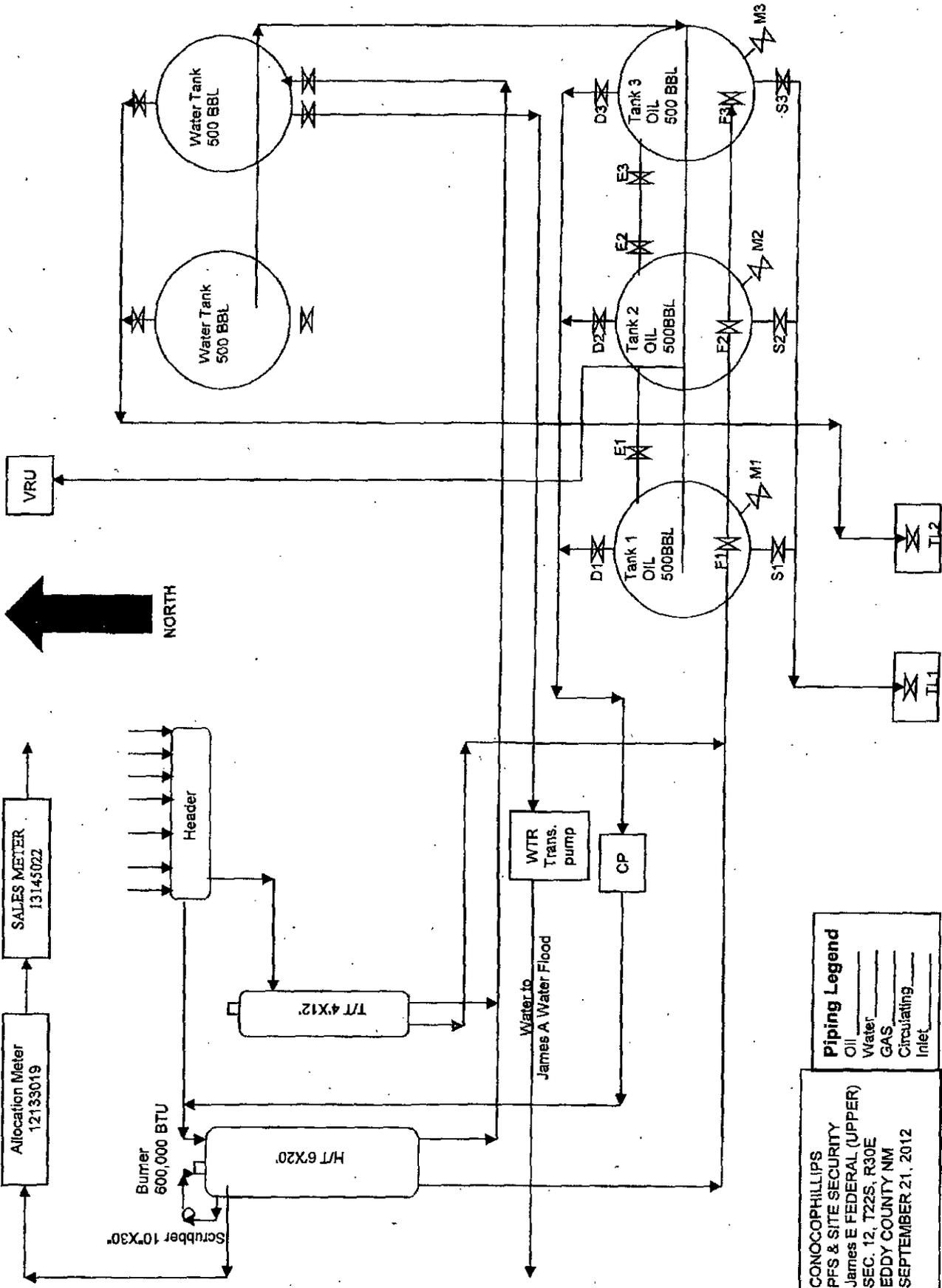
THIS SPACE FOR FEDERAL OR STATE OFFICE USE

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 BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

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.



CONOCOPHILLIPS
 PFS & SITE SECURITY
 James E. FEDERAL (UPPER)
 SEC. 12, T22S, R30E
 EDDY COUNTY NM
 SEPTEMBER 21, 2012

Piping Legend
 Oil _____
 Water _____
 GAS _____
 Circulating _____
 Inlet _____

**James E Upper
Wells**

| | API |
|--------------------|------------|
| James E 04 | 3001526371 |
| James E 05 | 3001526380 |
| James E 09 | 3001528056 |
| James E 11 | 3001526655 |
| James E 12 | 3001526644 |
| James E 13 | 3001526645 |
| James E 14 | 3001526646 |
| James E 15 | 3001527078 |
| Total wells | 8 |

Flaring Conditions of Approval

1. Report all volumes on OGOR B as disposition code 08.
2. Comply with NTL-4A requirements
3. Subject to like approval from NMOCD
4. Flared volumes will still require payment of royalties
5. Install gas meter on vent/flare line to measure gas prior to venting/flaring operations if it is not equipped as such at this time. Gas meter to meet all requirements for sale meter as Federal Regulations and Onshore Order #5. Include meter serial number on sundry.
6. This approval does not authorize any additional surface disturbance.
7. Submit updated facility diagram as per Onshore Order #3.
8. Approval not to exceed 90 days from date requested on sundry.
9. Submit Subsequent Report to this sundry with actual volumes of gas flared monthly on 3160-5 (sundry notice).
10. If flaring is still required past 90 days submit new request for approval.
11. If a portable unit is used to flare gas it must be monitored at all times.
12. Comply with any restrictions or regulations when on State or Fee surface.

JAM 110415