	- <del>7</del> .	· · · ·				
Form 3160-5 (September 2001)	UNITED STATES			FORM APPROVED OMB No. 1004-0135		
DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT			Expires: January 31, 2004			
			5. Lease Serial No.			
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.			LC 029405A 6. If Indian, Allottee or Tribe Name			
abandoned w	ell. Use Form 3160-3 (APD) for such pro	posals.	o. 11 ingian,	Anonee of Tribe	; inaine	
	UPLICATE - Other instructions on re	verse side			Name and/or No.	
1. Type of Well				8920003410 8. Well Name and No.		
Oil Well Gas Well Other Injection Well 2. Name of Operator				MCA Unit # 054		
ConocoPhillips Co.				9. API Well No.		
3a. Address     3b. Phone No. (include area code)			30-025-08039			
P.O. Box 180, Maljamar, NM 88264-0180 505.676.5569			10. Field and Pool, or Exploratory Area			
4. Location of Well (Footage, Sec., T, R., M., or Survey Description)				Maljamar GB/SA		
1980' FNL & 1980' FWL, Sec. 19, T 17S, R 32E, F				11. County or Parish, State		
		$e_{ij} = e_{ij} e_{ij$	Lea Co., N	M		
12. CHECK AP	PROPRIATE BOX(ES) TO INDICATE N	ATURE OF NOTICE. RI			ТА	
TYPE OF SUBMISSION		TYPE OF ACTION				
TILE OF SODMISSION			<u> </u>	<u> </u>		
Notice of Intent	Acidize Deepen	Production (Start	Resume)	Water Shut-		
I Notice of Intent	Alter Casing Fracture Tree	and a state of the	an a	Well Integri	-	
Subsequent Report	Casing Repair New Constru Change Plans Plug and Aba		۲	Other		
Final Abandonment Notice	Convert to Injection Plug Back	andon Mater Disposal	ingon			
urrently on file with your office	approval of Temporary Abandonment status fo . The State has approved the MIT until 06/05/0 14 at the Buckeye, NM meeting, we plan to retai	<b>16.</b>				
	I action taken before the State approved MIT ex				A. Inis	
			17 18 19 2			
		C (S <sup>1</sup> S <sup>1</sup> S)		27.5		
	23. 1990.T	PROVED FOR 12	MANT	HPERIOR	l.	
	Ari	PRUAED LAU		as s (applied and		
		NING 13 MA	¥ -1 1 2005			
	4. <b>1</b> 00		B TH S	<u>8/</u>		
		(a) (a)	0			
14. 1 hereby certify that the foregoin	is true and correct		21-1505	<u>, , , , , , , , , , , , , , , , , , , </u>		
Name (PrintedlTyped)	Т. Т.					
Kenneth N. Andersen		itle SHEaR Specialist	····			
Signature Kennet	Xn. Undersen 1	Date 05/07/04				
	THIS SPACE FOR FEDERAL		1997 - 1997 -			
Approved by (Signature)	ORIG. SGD.) DAVID R. GLASS	Name (Printed/Typed)		Title		
Conditions of approval, if any, are	attached. Approval of this notice does not warran	t or Office		Date	JUN 18 2004	
itle 18 U.S.C. Section 1001 and Ti states any false, fictitious or fraudule	itle 43 U.S.C. Section 1212, make it a crime for any period statements or representations as to any matter with	person knowingly and willfully t hin its jurisdiction.	o make to any	department or age	ency of the United	
Continued on next page)						

GW	N
----	---