## Form 3160-5 (August 1999)

New Mexico Oil Conservation Division, District I

UNITED STATES

1625 N. French Drive DEPARTMENT OF THE INTERIOR Hebbs, NM 88240

FORM APPROVED OMB No. 1004-0135 Expires November 30, 2000

## **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

LC 058697B If Indian, Allottee or Tribe Name

5. Lease Serial No.

abaridoried v	vell. Use Form 3160-3 (AF	ט) tor sucn proposa	is.		
SUBMIT IN TRIPLICATE - Other instructions on reverse side  1. Type of Well  Oil Well Gas Well X Other				7. If Unit or CA/Agreement, Name and/or No.	
2. Name of Operator				8. Well Name and No. MCA Unit #139	
ConocoPhillips Company				9. API Well 1	
3a. Address 4001 Penbrook Street - Odessa, TX 79762		3b. Phone No. (include area code) (432)368-1506		30-025-00681  10. Field and Pool, or Exploratory Area	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FNL & 1980' FWL, Sec. 25, T-17-S, R-32-E, Unit Letter F				Maljamar (	G-SA)
12. CHECK AF	PROPRIATE BOX(ES) T	O INDICATE NATU	RE OF NOTICE, R	EPORT, OR (	OTHER DATA
TYPE OF SUBMISSION		TY			
<ul><li>□ Notice of Intent</li><li>☑ Subsequent Report</li><li>□ Final Abandonment Notice</li></ul>	☐ Acidize ☐ Alter Casing ☐ Casing Repair ☐ Change Plans ☐ Convert to Injection	Deepen Fracture Treat New Construction Plug and Abandon Plug Back	Production (Star Reclamation Recomplete Temporarily Aba Water Disposal	, [X	
following completion of the intesting has been completed. Fir determined that the site is ready  11/30/2004: Scheduled	olved operations. If the operational Abandonment Notices shall be	vide the Bond No. on file want results in a multiple-complete filed only after all require	with BLM/BIA. Require	d subsequent report a new interval, ation, have been dependent of the depe	orts shall be filed within 30 days a Form 3160-4 shall be filed once completed, and the operator has
14. I hereby certify that the foregoin Name (Printed/Typed)  Stacey D. Linder  Signature	g is true and correct  Linder	Title HSE/Re Date 12/08/2	egulatory Represe	entative	
		OR FEDERAL OR ST	ATE OFFICE USE		
Approved by Title Date DEC 2 9 2004  OCHELD REPRESENTATIVE INSTAFF MANAGER					
Conditions of approval if any, are a certify that the applicate holds legal	ttached. Approval of this notice	does not warrant or Of	fice	Chry Arrabat	

Title 18 U.S.C. Section 1001, makes 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.

which would entitle the applicant to conduct operations thereon.

