

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD-HOBBS
JAN 18 2012

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No.
NMNM27508
6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

ConocoPhillips Company

3a. Address

3300 N "A" St Midland TX 79705

3b. Phone No. (include area code)

(432)688-9174

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
UL: B, 330' FNL 7 2160' FEL, Sec 28, 26S, 32E

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

8. Well Name and No.

Wilder 28 Federal 2H

9. API Well No.

30-025-40329

10. Field and Pool or Exploratory Area

Wildcat G05 S263208P

11. Country or Parish, State

LEA

NM

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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 checked="" 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 Spud report
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<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.)

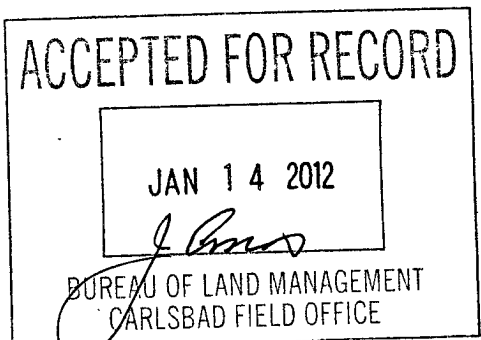
12/18/11 MIRU Nabors M-09.

12/22/11 Spud well w/ 17 1/2" hole and drill to 800' spud TD 12/23/11. RIH w/18 jts, 13 3/8", 54.5#, J-55 csg & set @ 781'.

12/26/11 Pre-flush w/20 bbls FW & pump 1330 sx class C lead cmt & 370 sx class C tail cmt. Bump plug to 743# & disp w/114 bbls FW. Circ 110 bbls cmt to surf.

NUBOP.

12/27/11 PT surf csg to 800#/30 mins - held.



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

Rhonda Rogers

Title **Staff Regulatory Technician**

Signature

Date **01/04/2012**

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

[Signature]

Title

Date

JAN 19 2012

Office

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.

(Instructions on page 2)

JAN 23 2012

[Signature]