

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

New Mexico Oil Conservation Division, District 4  
1625 N. French Blvd.  
Hobbs, NM 88240

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

**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.*

**SUBMIT IN TRIPLICATE - Other instructions on reverse side**

1. Type of Well  
☐ Oil Well ☐ Gas Well ☒ Other

2. Name of Operator  
ConocoPhillips Company

3a. Address  
4001 Penbrook Street Odessa TX 79762

3b. Phone No. ( include area code )  
(505)391-3128

4. Location of Well ( Footage, Sec., T., R., M., or Survey Description )  
Section 30, T-23-S, R-34-E, N  
660 FSL & 3300 FEL

5. Lease Serial No.  
LC 068404A

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.  
Bell Lake Unit Well # 2

9. API Well No.  
30-025-08489

10. Field and Pool, or Exploratory Area  
SWD

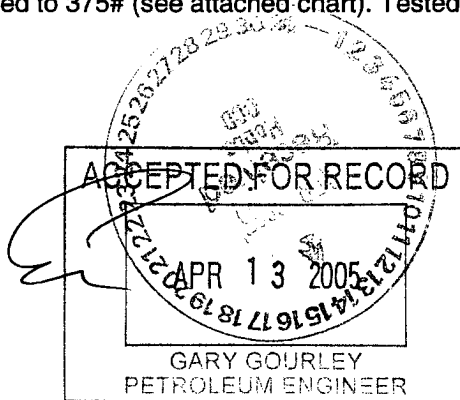
11. County or Parish, State  
Lea County

**12. CHECK 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 checked="" 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 type="checkbox"/> Other _____               |
|   | <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 recompleate horizontally, give subsurface locations 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 recompleation 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.)

On March 29 2005 replaced surface valve pumped 5 bbls of packer fluid and tested to 375# (see attached chart). Tested OK and was witnessed by E.L. Gonzales with the NMOCD.



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

John Abney

Title  
SHEaR Specialist

Signature

Date  
04/04/2005

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by

Title

Date

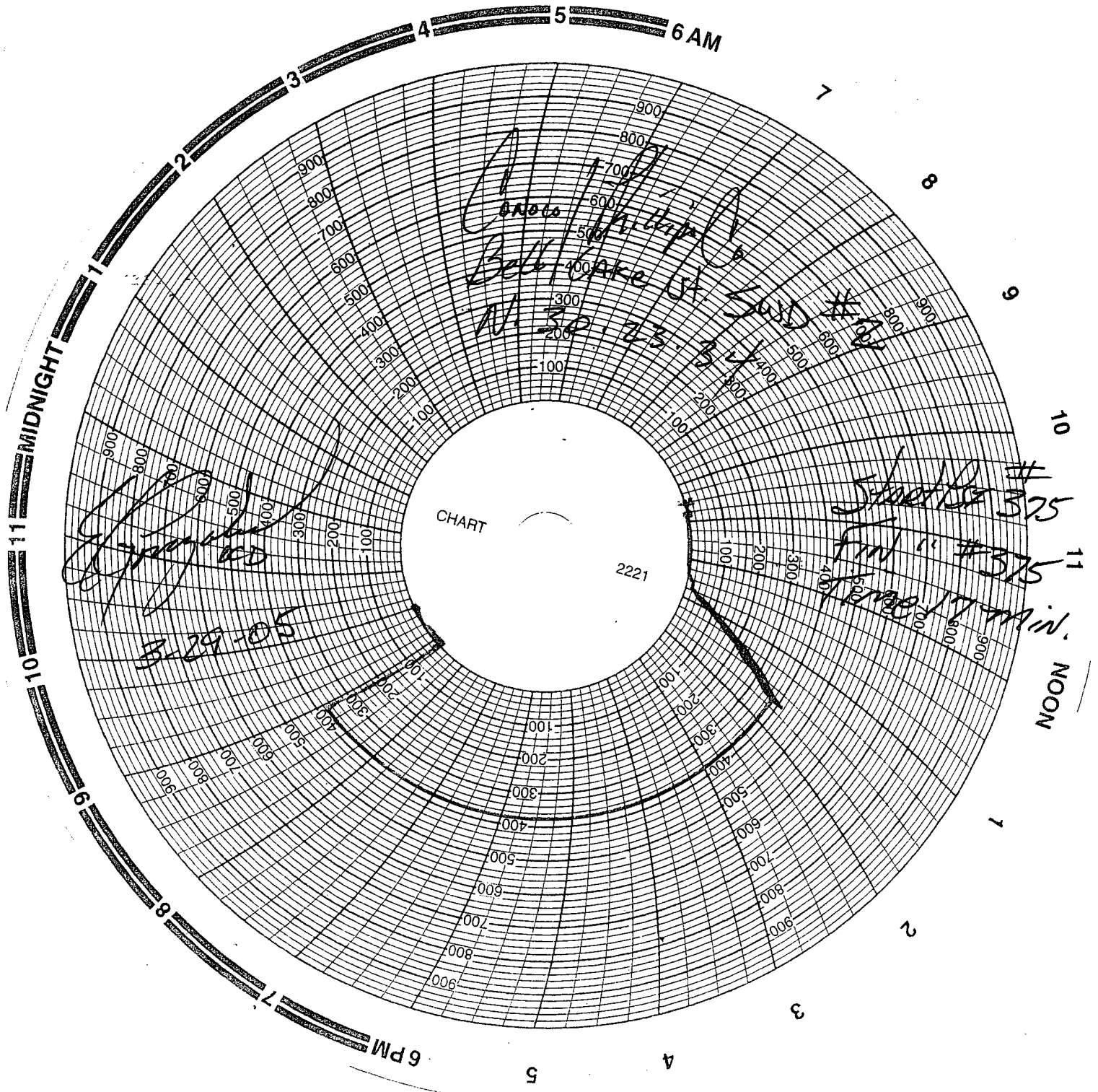
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

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.

( Instructions on reverse )

GW



*Handwritten:*  
Belt Lake St  
At 30 25  
Saw #32

*Handwritten:*  
3-29-05

*Handwritten:*  
Shut Be #325  
Fml " #325  
Time 17 min.