2. Name of Operator ConocoPhillips Company 3a. Address 4001 Penbrock St., Odessa TX 79762-5917 4. Location of Well (Footage, Sec. T., R. M., or Survey Description) 1165' FNL & 1345' FEL, Sec. 30, T 17S, R 32E, B 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, RE TYPE OF SUBMISSION 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, RE TYPE OF SUBMISSION 13. Describe Proposed or Completed Operation (Clearly state all pertinent details, including estimated starting date of any 13. Describe Proposed or Completed Operation (Clearly state all pertinent details, including realmated and true the Bond under which the work will be performed or provide the Bond No. on file with BLMBIA. Required following completion of the involved operation. If the operation results in a multiple completion or recompletion in a testing has been completed. Final Abandonment Notice shall be filed only after all requirements, including relamatid determined that the site is ready for final inspection.) ConocoPhillips requests renewal appreval of Temporary Abandonment status for the above reference 09/26/2002 and its currently on file with your office. As per our agreements of 04/28/2004 at the Buckeye, NM meeting, the joint BLM/NMOCD meeting 1 09/11/2004, and the joint BLM/NMOCD meeting hed at the ConsocPhillips Hobbs, NM office on 02/2 for recompletion, reactivation, or P & A. This evaluation will be completed and action taken before 1 09/21/2002 and is currently on file with your office.	tesume) Water Shut-Off Well Integrity Other on
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 Gas Well Oll Well Gas Well Other 3b. Phone No. (include area code) 3A Address 4001 Penbrok St., Odessa TX 19762-5917 3b. Control Well (Pootage, Sc., T. R., M, or Survey Description) 3b. Phone No. (include area code) 1165' FNL & 1345' FEL, Sec. 30, T 17S, R 32E, B 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, RE TYPE OF SUBMISSION TYPE OF ACTION Onice of Intent Acidize Onge Plans Orage Plans Convert to Injection Plag Back 13 Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any If the proposal is to depen directionally or recomplete Incitoxially, give absurface locations and measured and true Attach the Bord under which the work will be performed or provide the Bord No. of file will BUM/NMOCD meeting to 602/2002 and is currently on file with your office. As per our agreements of defa2/2004 at the Backeye, NM meeting, the joint BLM/NMOCD meeting to 602/2002 and is the Mark None office. 4. Ihereby certify that the foregoing is true and correct Name (Printed Typed) This evaluation will be completed as action taken before for completion, reactivation, o	LC - 029410B LC - 029410B If Indian, Allottee or Tribe Name 7. If Unit or CA/Agreement, Name and/or No. 8920003410 8. Well Name and No. MCA Unit # 289 9. API Well No. 30-025-23789 10. Field and Pool, or Exploratory Area Maljamar, GB/SA 11. County or Parish, State Lea Co., NM ORT, OR OTHER DATA desume) Water Shut-Off Well Integrity Other on
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THIS SPACE FOR FEDERAL OR STATE OFFICE U	/2005
Approved by	
ertify that the applicant holds legal or equitable title to those rights in the subject lease office which would entitle the applicant to conduct operations thereon.	
itle 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 n tates any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.	E Date
(Instructions on page 2)	E Date

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