

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010

**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.*

OCD #005  
HOBBSS  
MAY 30 2013  
RECEIVED

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

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMLC031620A
2. Name of Operator CONOCOPHILLIPS COMPANY		6. If Indian, Allottee or Tribe Name
3a. Address P. O. BOX 51810 MIDLAND, TX 79710		7. If Unit or CA/Agreement, Name and/or No. NM 71041X
3b. Phone No. (include area code) Ph: 432-688-9174		8. Well Name and No. SEMU 158
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 24 T20S R37E Mer NMP SWSW 660FSL 660FWL		9. API Well No. 30-025-35539
		10. Field and Pool, or Exploratory SKAGGS; GRAYBURG
		11. County or Parish, and State LEA COUNTY, NM

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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Deepen
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Fracture Treat
	<input type="checkbox"/> Production (Start/Resume)
	<input type="checkbox"/> Alter Casing
	<input type="checkbox"/> Reclamation
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Well Integrity
	<input type="checkbox"/> Change Plans
	<input checked="" type="checkbox"/> Recomplete
	<input type="checkbox"/> Other
	<input type="checkbox"/> Convert to Injection
	<input type="checkbox"/> Plug and Abandon
	<input type="checkbox"/> Temporarily Abandon
	<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 recomplete 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 shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion 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.)

Recomplete in the Skaggs Grayburg.  
4/17/13 TIH w/open ended tbg to 6931' & pump 25 sx class C cmt f/7213' to 6960'.  
4/18/13 RIH tag TOC @ 7003' Stack out @ 6394'. TIH w/bit & scrapper f/6394' to 6410'. Tagged TOC @ 7003'.  
4/19/13 TIH w/CIBP & set @ 6700' test & dumped bail cmt. Tagged cmt @ 6660'. TIH w/CIBP & set @ 6400' & make 2 dump bailer runs w/cmt.  
4/20/13 TIH w/open ended tbg tag cmt @ 6371' pump 25 bbls & pull up to 5150' pump 14 sx class C cmt (est TOC @ 5155'). TIH w/CIBP & set @ 4100' TIH & perf f/3780' to 3955', 128 hole @ 2spf.  
4/21/13 Acidize w/160 bbls 15% NEFE w/ 256 SG ball sealer.  
4/29/13 Frac perms f/3780' to 3955' w/95,420 gals YF120ST, & 70,502# 20/40 premium brown sand & 58,080# 20/40 resin coated brown sand. Circ hole clean.  
5/6/13 RIH w/129 jts, 2 7/8", 6.5#, J-55 tbg & set @ 4017'. NDBOP & set TAC w/12 pts. NUWH. RIH

14. I hereby certify that the foregoing is true and correct.

**Electronic Submission #208159 verified by the BLM Well Information System For CONOCOPHILLIPS COMPANY, sent to the Hobbs Committed to AFMSS for processing by KURT SIMMONS on 05/22/2013 ()**

Name (Printed/Typed) RHONDA ROGERS	Title STAFF REGULATORY TECHNICIAN
Signature (Electronic Submission)	Date 05/21/2013

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 _____		Date MAY 26 2013

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 furnish to any agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***

PA North Hardy Tebb Drinkard

JAN 14 2014

**Additional data for EC transaction #208159 that would not fit on the form**

**32. Additional remarks, continued**

with rods and pump, space out, hang well. RDMU 5/7/13