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OCD

Form 3160-5  
(August 2007)

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.

5. Lease Serial No.  
NMLC058395

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.  
MCA UNIT 507

9. API Well No.  
30-025-41395

10. Field and Pool, or Exploratory  
MALJAMAR; GRAYBURG SAN AN

11. County or Parish, and State  
LEA COUNTY, NM

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

1. Type of Well  
 Oil Well  Gas Well  Other: INJECTION

2. Name of Operator  
CONOCOPHILLIPS  
Contact: ASHLEY BERGEN  
E-Mail: ashley.bergen@conocophillips.com

3a. Address  
P.O. BOX 51810  
MIDLAND, TX 79710

3b. Phone No. (include area code)  
Ph: 432-688-6983

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 22 T17S R32E SWSE 1225FSL 2045FEL

**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"/> Reclamation                          |
|   | <input type="checkbox"/> Water Shut-Off                       |
|   | <input type="checkbox"/> Well Integrity                       |
|   | <input checked="" type="checkbox"/> Other Drilling Operations |
|   | <input type="checkbox"/> Change Plans                         |
|   | <input type="checkbox"/> New Construction                     |
|   | <input type="checkbox"/> Recomplete                           |
|   | <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 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 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.)

1/8/14 RIH w/ perf gun & shot perfs @ 3967'-4057'. Frac'd stage one w/ 7,182 gals of 15% HCl. RIH w/CBP @ 3940' & shot perfs @ 3828' -3915'. Frac'd stage 2 w/ 5,460 gals of 15% HCl & 70,860# of proppant.  
1/27/14 RIH w/ bit & drilled out plug. Circ hole clean.  
1/30/14 RIH w/ 116 jts, 2 3/8", 4.7#, J-55 tbg set @ 3796' & pkr set @ 3782'.  
ND BOP NU WH. Run MIT test @ 520#/ 35 mis tset good. Pat from BLM witnessed test (see attached chart). RDMO.

OCD Conditions of Approval  
Accepted for **RECORD ONLY**. All Federal forms require **BLM APPROVAL**.

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

Electronic Submission #236419 verified by the BLM Well Information System  
For CONOCOPHILLIPS, sent to the Hobbs

Name (Printed/Typed) ASHLEY BERGEN Title STAFF REGULATORY TECH

Signature (Electronic Submission) Date 02/24/2014

**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 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.

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

MJB/OCD 8/6/2014 AUG 11 2014

HOBBS OGD

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