

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD-HOBBS

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

EC

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.
NMLC031695B

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

HOBBS OCD
AUG 18 2014

1. Type of Well
 Oil Well Gas Well Other

8. Well Name and No.
WARREN UNIT 09

2. Name of Operator
CONOCOPHILLIPS COMPANY
Contact: RHONDA ROGERS
E-Mail: rogerrr@conocophillips.com

9. API Well No.
30-025-07841-00-D2

3a. Address
MIDLAND, TX 79710

3b. Phone No. (include area code)
Ph: 432-688-9174

10. Field and Pool, or Exploratory
WARREN

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 27 T20S R38E SWNW 1980FNL 660FWL
32.545801 N Lat, 103.142741 W Lon

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

RECEIVED

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 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.)

ConocoPhillips performed the 5 year MIT on 2/18/14 to 520#/60 mins. Test Good. chart attached

14. I hereby certify that the foregoing is true and correct.
Electronic Submission #240574 verified by the BLM Well Information System
For CONOCOPHILLIPS COMPANY, sent to the Hobbs
Committed to AFMSS for processing by BEVERLY WEATHERFORD on 05/07/2014 (14BMW0391SE)

Name (Printed/Typed) RHONDA ROGERS Title STAFF REGULATORY TECHNICIAN

Signature (Electronic Submission) Date 03/31/2014

ACCEPTED FOR RECORD

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____ Title _____ Date AUG 12 2014

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 _____

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD 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.

** BLM REVISED **

MMS/OCD 8/18/2014

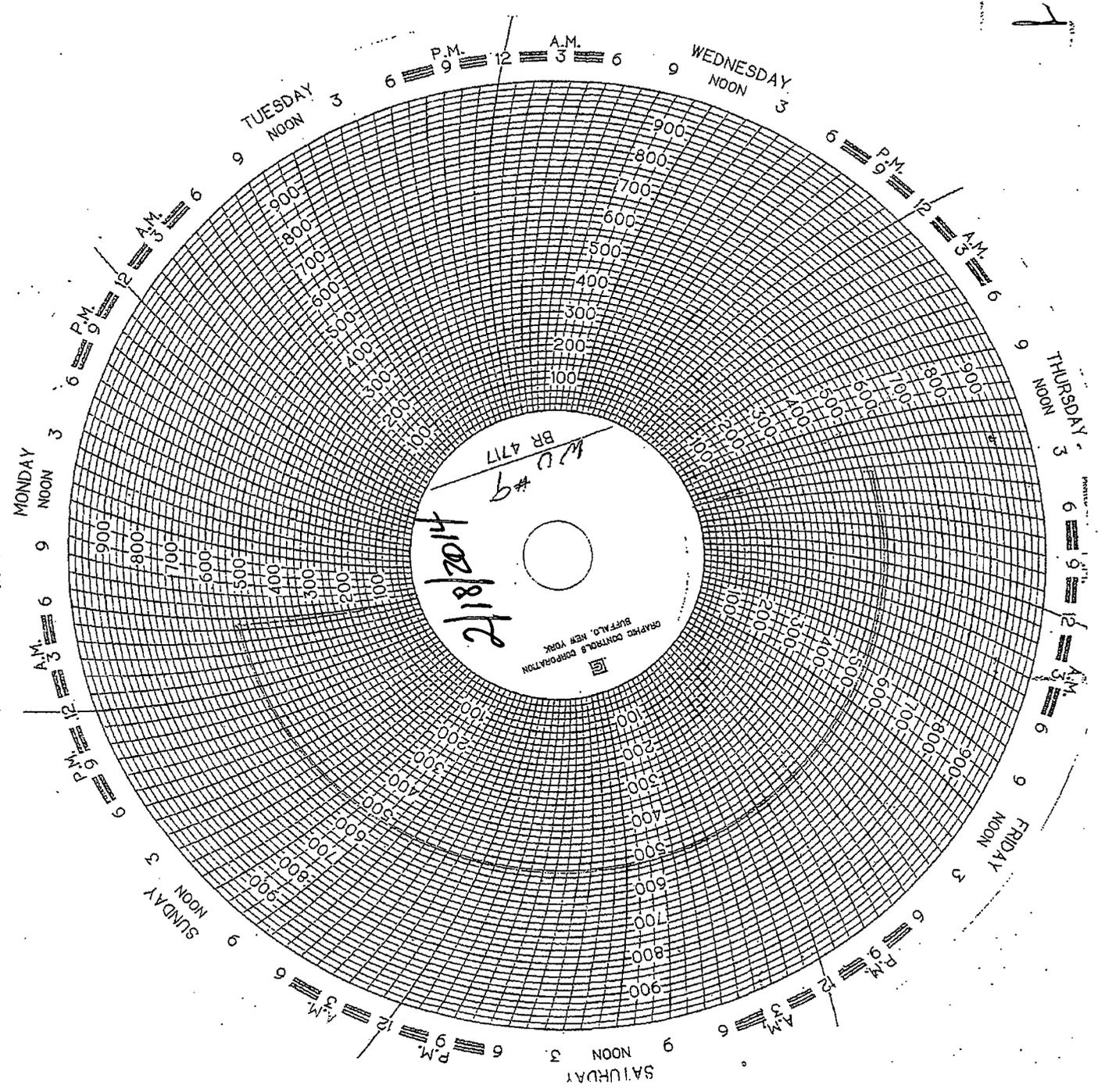
AUG 18 2014

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Revisions to Operator-Submitted EC Data for Sundry Notice #240574

	Operator Submitted	BLM Revised (AFMSS)
Sundry Type:	MIT SR	MIT SR
Lease:	NMLC031695B	NMLC031695B
Agreement:		
Operator:	CONOCOPHILLIPS COMPANY P. O. BOX 51810 MIDLAND, TX 79710 Ph: 432-688-9174	CONOCOPHILLIPS COMPANY MIDLAND, TX 79710
Admin Contact:	RHONDA ROGERS STAFF REGULATORY TECHNICIAN E-Mail: rogerrs@conocophillips.com Ph: 432-688-9174	RHONDA ROGERS STAFF REGULATORY TECHNICIAN E-Mail: rogerrs@conocophillips.com Ph: 432-688-9174
Tech Contact:	RHONDA ROGERS STAFF REGULATORY TECHNICIAN E-Mail: rogerrs@conocophillips.com Ph: 432-688-9174	RHONDA ROGERS STAFF REGULATORY TECHNICIAN E-Mail: rogerrs@conocophillips.com Ph: 432-688-9174
Location:		
State:	NM	NM
County:	LEA	LEA
Field/Pool:	WARREN BLINEBRY-TUBB O&G	WARREN
Well/Facility:	WARREN UNIT 9 Sec 27 T20S R38E Mer NMP SWNW 1980FNL 660FWL	WARREN UNIT 09 Sec 27 T20S R38E SWNW 1980FNL 660FWL 32.545801 N Lat, 103.142741 W Lon

R



MONDAY

NOON 3 6 9

A.M. 3 6 9

P.M. 6 9 12

SUNDAY

NOON 3 6 9

A.M. 3 6 9

P.M. 6 9 12

TUESDAY

NOON 3 6 9

A.M. 3 6 9

P.M. 6 9 12

SATURDAY

NOON 3 6 9

A.M. 3 6 9

WEDNESDAY

NOON 3 6 9

A.M. 3 6 9

P.M. 6 9 12

FRIDAY

NOON 3 6 9

A.M. 3 6 9

THURSDAY

NOON 3 6 9

A.M. 3 6 9

1102/8112
WU #9
BR 4717

GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

SER 4593

Calibrated 2-12-14

Jimmy Burns

Jesse Menzies

2-18-14

COPC

CONRAD PHILLIPS
 Warren Unit Letter E
 Sec. 27-7205-R38E
 Well No #9
 Fed. LSE, No. LC-031695B
 Nabors Truck 343
 PSI 530
 Time 1030 AM
 1102 AM

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