

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.

SUBMIT IN TRIPLICATE - Other instructions on reverse side.		5. Lease Serial No. NMNM130738
1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		6. If Indian, Allottee or Tribe Name
2. Name of Operator CONOCOPHILLIPS		7. If Unit or CA/Agreement, Name and/or No.
Contact: ASHLEY BERGEN E-Mail: ashley.bergen@conocophillips.com		8. Well Name and No. WILDER FEDERAL AC COM 28 8H
3a. Address P.O. BOX 51810 MIDLAND, TX 79710	3b. Phone No. (include area code) Ph: 432-688-6938	9. API Well No. 30-025-41692
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 28 T26S R32E Mer NMP NWNW 280FNL 330FWL		10. Field and Pool, or Exploratory JENNINGS; BONE SPRING UPP
		11. County or Parish, and State LEA COUNTY, NM

HOBBS OCD

SEP 02 2014

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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Deepen
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Alter Casing
	<input type="checkbox"/> Fracture Treat
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Change Plans
	<input type="checkbox"/> Plug and Abandon
	<input type="checkbox"/> Convert to Injection
	<input type="checkbox"/> Plug Back
	<input type="checkbox"/> Production (Start/Resume)
	<input type="checkbox"/> Reclamation
	<input type="checkbox"/> Recomplete
	<input type="checkbox"/> Temporarily Abandon
	<input type="checkbox"/> Water Disposal
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Well Integrity
	<input checked="" type="checkbox"/> Other Well Spud

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.)

7/10/14 MIRU H&P 486. RIH w/ 17 1/2" bit.
 7/11/14 Drilled ahead to 970' (spud/TD).
 7/12/14 RIH w/ 22 jts, 13 3/8", 54.5#, J-55 csg set @ 959'. Pre-flush w/ 20 bbls FW. Pumped 470 sx (140 bbls) of class C lead cmt & 414 sx (98 bbls) of class C tail cmt. Disp, bump plug & circ 160 bbls to surf. NU BOP
 7/13/14 PT csg 1530#/30 mins- test good. Continued drilling w/ 13 3/8" bit. 12 1/4 ?
 7/18/14 Drilled ahead to 4,484'.
 7/19/14 RIH w/ 98 jts, 9 5/8", 40#, L-80 csg set @ 4469'. Pre-flush w/ 20 bbls FW. Pump 975 sx (441 bbls) of class C lead cmt & 335 sx (81 bbls) of class C tail cmt. Disp w/ 335 bbls FW, bump plug & circ 100 bbls to surf.
 7/20/14 WOC as requested by BLM. PT- 2500#/30 mins- test good.
 7/21/14 RIH w/ 8 3/4" bit and continued drilling.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #257794 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 08/20/2014

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 ****

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