

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Hobbs

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.  
NMLC058408A

6. If Indian, Allottee or Tribe Name

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

7. If Unit or CA/Agreement, Name and/or No.  
8920003410

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

8. Well Name and No.  
MCA UNIT 451

2. Name of Operator  
CONOCOPHILLIPS COMPANY

Contact: SUSAN B MAUNDER  
E-Mail: Susan.B.Maunder@conocophillips.com

9. API Well No.  
30-025-41391-00-S1

3a. Address  
MIDLAND, TX 79710

3b. Phone No. (include area code)  
Ph: 281-206-5281

10. Field and Pool, or Exploratory  
MALJAMAR

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 26 T17S R32E SWNE 1365FNL 2180FEL  
32.483260 N Lat, 103.440806 W Lon

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 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 checked="" type="checkbox"/> Reclamation    | <input 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 Company respectfully submits this subsequent report of interim reclamation. Work was completed November 14, 2014 as discussed in our approved plan. Excess caliche was removed and top soil "flipped".

Thank you for your time spent reviewing this report.

Accepted for Record Purposes.  
Approval Subject to Onsite Inspection.  
If BLM Objectives are not achieved,  
additional work may be required.  
Date: 11-7-15

Signature: *James A. Combs*

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

Electronic Submission #284334 verified by the BLM Well Information System  
For CONOCOPHILLIPS COMPANY, sent to the Hobbs  
Committed to AFMSS for processing by LINDA JIMENEZ on 01/30/2015 (15LJ0630SE)

Name (Printed/Typed) SUSAN B MAUNDER Title SENIOR REGULATORY SPECIALIST

Signature (Electronic Submission) Date 12/08/2014

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.

\*\* BLM REVISED \*\*

NOV 23 2015