

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.  
NMLC031695B

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.

1. Type of Well  
 Oil Well  Gas Well  Other

8. Well Name and No.  
WARREN UNIT 84

2. Name of Operator  
CONOCOPHILLIPS COMPANY  
Contact: GREG BRYANT  
E-Mail: GREG.BRYANT@BASICENERGYSERVICES.COM

9. API Well No.  
30-025-27105

3a. Address  
600 N. DAIRY ASHFORD  
HOUSTON, TX 77079  
3b. Phone No. (include area code)  
Ph: 432-563-3355

10. Field and Pool, or Exploratory  
WARREN

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 33 T20S R38E 660FNL 1920FWL

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/R
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete
	<input type="checkbox"/> Change Plans	<input checked="" type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abanc
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal

INT TO PA \_\_\_\_\_  
P&A NR \_\_\_\_\_  
P&A R fm X

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 recomplate 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 recomplate 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.)

- 8/31/16 - MIRU
- 9/1/16 - POOH Rods, NU BOP
- 9/2/16 - POOH Tbg. RIH Tbg - Tag BP @ 5650' - cap w/ 35sx cmt
- 9/6/16 - Tag @ 5017'. Set 5-1/2 CIBP @ 4900'. Circ hole w/ MLF. Cap w/ 25sx cmt
- 9/7/16 - Spot 70sx cmt @ 4150' - Tag @ 3504'. Spot 55sx cmt @ 3000'
- 9/8/16 - Tag @ 2470'. Spot 25sx cmt @ 1550' - Tag @ 1292'. ND BOP. Spot 46sx cmt @ 300' to surface
- 9/9/16 - RDMO

*Reclamation due 3-9-17*

14. I hereby certify that the foregoing is true and correct.  
Electronic Submission #353871 verified by the BLM Well Information System  
For CONOCOPHILLIPS COMPANY, sent to the Hobbs  
Committed to AFMSS for processing by DEBORAH MCKINNEY on 10/07/2016 ( )

Name (Printed/Typed) GREG BRYANT Title AGENT

Signature (Electronic Submission) Date 10/07/2016

*Accepted for Record* THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By *James R. [Signature]* Title *SPEET*

Date *10-22-16*

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 *CFD*

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 \*\***

**FOR RECORD ONLY**  
*MW/OCD 10/31/2016*