Form 3160-5 (April2004)

## **UNITEDSTATES** DEPARTMENT OF THE INTERIOR

FORMAPPROVED OM B No. 1004-0137 Expires: March 31, 2007

BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WELLS		Expires. March 31, 2007	
		5. Lease Serial No.	
		NM 2512	
Do not use this form for proposals to abandoned well. Use Form 3160-3 (AF	drill or to re-enter an PD) for such proposals.	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  X Oil Well Gas Well Other		8. Well Name and No.	
2. Name of Operator Conoco Phillips Company  3a. Address 3b. Phone No. (include area code) 4001 Penbrook Street Odessa TX 79762  4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  1980 FSL; 660 FWL; SEC 13; T20S; R37E		SEMU PERMIAN WELL #43	
		9. API Well No.	
		30-250-6085 10. Field and Pool, or Exploratory Area	
		SKAGGS GRAYBURG	
		11. County or Parish, State LEA COUNTY, NEW MEXICO	
12. CHECK APPROPRIATE BOX(ES)TO I	NDICATE NATURE OF NOTICE, I	REPORT, OR OTHER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION	TYPEOF ACTION	
Notice of Intent  Notice of Intent  Acidize  Alter Casing  Casing Repair  Change Plans  Convert to Injection	Deepen Production (S FractureTreat Reclamation New Construction Recomplete Plugand Abandon Temporarily A Plug Back Water Disposa	Well Integrity    X   Other   REMEDIAL WOR    Shandon	
13. Describe Proposed or Completed Operation (clearly state all pertine If the proposal is to deepen directionally or recomplete horizontally, Attach the Bond under which the work will be performed or provide following completion of the involved operations. If the operation restesting has been completed. Final Abandonment Notices shall be fill determined that the site is ready for final inspection.)  REMEDIAL CEMENTING:  SPOT 50 SXS CMT W/2% CACL TAG CIBP @ LOADE & TEST 500 PSI OK.  PUT WELL BACK ON PRODUCTION	give subsurface locations and measured and e the Bond No. on file with BLM/BIA. Req sults in a multiple completion or recompletion ed only after all requirements, including recla	true vertical depths of all pertinent markers and zones. uired subsequent reports shall be filed within 30 days in in a new interval, a Form 3160-4 shall be filed once amation, have been completed, and the operator has	
14. I hereby certify that the foregoing is true and correct			
Name (Printed/Typed)	1		
Gay Thomas	Title Regulatory Ass	sistant	
Signature Day Thomas	Date 07/18/2006		
THIS SPACE FOR FEDERAL OR STATE OFFICE USE			

which would entitle the applicant to conduct operations thereon. 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.

Title

Office

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

Approved by \_ \_ \_