## Form 3160-5 (August 1999)

## OCA-Hobbs

## UNITED STATES DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB No. 1004-0135 Expires November 30, 2000 5. Lease Serial No.

## LC 029405A

**SUNDRY NOTICES AND REPORTS ON WELLS** Do not use this form for proposals to drill or to re-enter an

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.				6. If Indian	6. If Indian, Allottee or Tribe Name	
SUBMIT IN TRIPLICATE - Other instructions on reverse side  1. Type of Well				7. If Unit o	r CA/Agreement, Name and/or No.	
☐ Oil Well ☐ Gas Well ☐ Other					8. Well Name and No. MCA Unit #253	
2. Name of Operator ConocoPhillips Company				9. API Wel	9. API Well No.	
3a. Address 4001 Penbrook Odessa TX 79763		3b. Phone No. (include area code) (432)368-1371		30-025-08052  10. Field and Pool, or Exploratory Area		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				Maljamar Grayburg/SA  11. County or Parish, State		
1980' FNL & 460' FWL, SEC. 20, T17S, R32E, E				Lea, NM	of Landing State	
12. CHECK AP	PROPRIATE BOX(ES) TO	O INDICATE NA	TURE OF NOTICE, I	REPORT, OR	OTHER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION					
☐ Notice of Intent  ☐ Subsequent Report	<ul><li>☐ Acidize</li><li>☐ Alter Casing</li><li>☐ Casing Repair</li></ul>	<ul><li>□ Deepen</li><li>□ Fracture Treat</li><li>□ New Construction</li></ul>	Production (State   Reclamation on Recomplete	art/ Resume)	☐ Water Shut-Off ☐ Well Integrity ☐ Other	
☐ Final Abandonment Notice	<ul><li>☐ Change Plans</li><li>☐ Convert to Injection</li></ul>	☐ Plug and Aband ☐ Plug Back	lon X Temporarily A  Water Disposal			
ConocoPhillips requests re MIT was run on 8/27/02 ar We wish to retain this welll completed within the next	enewal approval of Temp nd should be on file in you oore while evaluating uph	ur office. nole potential in	the Queen and San	Andres. Thi	s evaluation-should be	
		Enck	oved For <u>12</u> 1		* The same of the	
14. I hereby certify that the foregoi Name (Printed/Typed) Kristy S. Ward	ng is true and correct	Title	e gulatory Assistant		1000	
Signature S. Was d		Date	Date 10/23/2003			
0. 10.	THIS SPACE F		R STATE OFFICE US	Ē		
Hopered by 10 RM	2. 26d.) <i>J</i> oe 6. Lai	RA	Title Condonn En	Di	ate ///20/03	
Contilions of approval, if any, are certify that the applicant holds legal which would entitle the applicant to			Office CFO		-,,-	
Title 18 U.S.C. Section 1001, make fraudulent statements or representat			make to any department o	r agency of the U	United States any false, fictitious or	