Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

RECEIVED

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 and OBBSOCE abandoned well. Use form 3160-3 (APD) for such proposals.					5. Lease Serial No. NMLC057210 6. If Indian, Allottee or Tribe Name								
							SUBMIT IN TRIPLICATE - Other instructions on reverse side. 1. Type of Well					7. If Unit or CA/Agre NMNM70987A	ement, Name and/or No.
												8. Well Name and No	
☑ Oil Well ☐ Gas Well ☐ Other					MCA UNIT 409								
2 Name of Operator Contact: JALYN FISKE CONOCOPHILLIPS COMPANY E-Mail: jalyn.fiske@contractor.conocophillips.com					9 API Well No. 30-025-38978-0	00-X1 🗸							
3a. Address		3b. Phone No. (include area code)		10 Field and Pool, or Exploratory									
PO BOX 7500 BARTLESVILLE, OK 74005	Ph: 432-688-6813			Maliamar Gray burg SA									
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					Maljamar (and State							
Sec 27 T17S R32E NWSW 2130FSL 130FWL					LEA COUNTY, NM								
36C 27 1173 R32E NW3W 2130F3L 130FWL					LEA COOM 11, NW								
12. CHECK APPI	ROPRIATE BOX(ES) TO) INDICATE	NATURE OF	NOTICE, RI	EPORT, OR OTHE	R DATA							
TYPE OF SUBMISSION	TYPE OF ACTION												
	☐ Acidize	□ Dee	Deepen		tion (Start/Resume)	☐ Water Shut-Off							
□ Notice of Intent	☐ Alter Casing		ture Treat	☐ Reclam		☐ Well Integrity							
Subsequent Report ■	ubsequent Report Casing Repair		☐ New Construction		olete	Other Well Spud							
☐ Final Abandonment Notice	Change Plans	- ·		_	Temporarily Abandon								
	Convert to Injection	_		Water Disposal									
13. Describe Proposed or Completed Op	_			_		manimata di matian thansa							
Attach the Bond under which the worfollowing completion of the involved testing has been completed. Final A determined that the site is ready for the strength of the strength	I operations. If the operation rebandonment Notices shall be final inspection.) 80'-700' 8-5/8" 24# surf. csg. fror	esults in a multij iled only after al m surf. to 960	ole completion or not requirements, incompleted with the complete	ecompletion in luding reclamat	a new interval, a Form 3 ion, have been complete	160-4 shall be filed once d, and the operator has							
14. Thereby certify that the foregoing i	Electronic Submission	#65613 verified	by the BLM We	ell Information	n System								
Con	For CONOCC nmitted to AFMSS for prod		MPANY, sent to RT SIMMONS or		09KMS0263SE)								
Name(Printed/Typed) JALYN FISKE			Title REPORT PREP		ER								
Signature (Electronic	Submission)		Date 12/15/	2008									
	THIS SPACE FO	OR FEDERA	L OR STATE	OFFICE U	SE								
Approved By JAMES A AMOS			TitleSUPERVI			Date 12/20/20							
Conditions of approval, if any, are attached. Approval of this notice does no			 	IOUN LFO		2008							
certify that the applicant holds legal or equitable title to those rights in the subject which would entitle the applicant to conduct operations thereon.			Office Hobbs	K	-2	2008							
Title 18 U S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent					make to any department	or agency of the United							