N.M. Oil Cons. Division

Form 3160-5 (August 1999)

1625 N. French Dr. **UNITED STATES**

DEPARTMENT OF THE INTERIO HObbs, NM 88240

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

BUREAU OF LAND MANAGEMENT

5. Lease Serial No.

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.					NM-86172 6. If Indian, Allottee or Tribe Name				
								SUBMIT IN TRIPLICATE - Other instructions on reverse side	
1. Type of Well Gas Well	Other					8. Well N	ame a	nd No.	
2. Name of Operator						Appleseed "17" Federal #4			
CONCHO RESOURCES INC. 3a. Address 3b. Phone No. (include area code)						9. API Well No. 30-025-36382			
550 W. TEXAS, SUITE 1300 MIDLAND TX 79701 (432)685-4373 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1830' FSL & 2055' FEL, Sec. 17, T20S, R35E					10. Field and Pool, or Exploratory Area				
					Featherstone; Bone Spring 11. County or Parish, State				
					Lea				
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, R						New Mexico			
	PROPRIATE BOX(ES) I	O INDICA			-	EPORT, O	K O I	HER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION								
☐ Notice of Intent	☐ Acidize ☐ Alter Casing	Deepe	en are Treat		Production (Start Reclamation	Resume)		Water Shut-Off	
Subsequent Report	Casing Repair	_	Construction		Recomplete		X	Well Integrity Other Csg. test & cmt	
☐ Final Abandonment Notice	Change Plans		and Abandon		Temporarily Aba	ndon			
— Final Abandonment Notice	Convert to Injection	Plug l	Back		Water Disposal			- date the artificial and	
testing has been completed. Fin determined that the site is ready 10-21-03 Spud 17 1/2" hol 10-22-03 Ran 10 jts. 13 3/2 pps flocele. Circ 150 sx to 10-29-03 In 12 1/4" hole ra 4 3# Gilsonite + 0.25# Flocele. The site of 11-23-03 In 7 7/8" hole ra 50/50/10 Poz H + 5% salt 4.4% FL. Released rid @ 1	of for final inspection.) e @ 3:30 AM 8" 48# H-40 STC csg. s pit. WOC 24 hrs. an 93 jts. 8 5/8" 32# J-5 cele + 200 sx C + 1% Co n 250 jts. 5 1/2" 17# J-5 + 5#/sx LCM-1 + 1/4#/s 1:00 PM 11/22/03	et @ 431 5 ST&C c aCl2. Ciro 5 & N-80,	csg. set @c. 125 sx t LTC csg.	entrali 4011 o pit. set @	izers and cmt' '. Cmt''d w/ 12 WOC 24 hrs. 0 10,915'. Ra	d w/460 s 225 sx 50 n 24 cent	falize	. C + 2% CaCl + 0.25 10 Poz C gel + 5% salt 415 16 7> 7 ers and cmt'd w/850 sx	
14. I hereby certify that the foregoin Name (Printed/Typed)	ng is true and correct		Title						
BRENDA COFFMAN				REGULATORY ANALYST					
Signature 100 Modes	ofman	-	Date 11/24						
ACCEPTED		FOR FEDE	ERAL OR S	TATE	OFFICE USE				
	D.) DAVID II.			Title			Date		
Conditions of approval, if any, are certify that the applicant holds legal which would entitle the applicant to	attached. Approval of this noti	ice does not the subj	warrant or ect lease	Office					
Title 18 U.S.C. Section 100 to make fraudulent statements or representati	es is a Frime for any person know	wingly and v	villfully to ma	ke to a	ny department or a	igency of the	Unit	ed States any false, fictitious or	