

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM 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.***SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

|  |  |  |
|--|--|--|
| 1. Type of Well<br><input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other |  | 8. Well Name and No.<br>MCA UNIT 475                       |
| 2. Name of Operator<br>CONOCOPHILLIPS COMPANY  |  | 9. API Well No.<br>30-025-39349-00-X1                      |
| 3a. Address<br>3300 N A ST BLDG 6<br>MIDLAND, TX 79710   |  | 10. Field and Pool, or Exploratory<br>MALJAMAR-GRAYBURG SA |
| 3b. Phone No. (include area code)<br>Ph: 432-688-6813  |  | 11. County or Parish, and State<br>LEA COUNTY, NM          |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)<br>Sec 27 T17S R32E NWSE 2580FSL 810FEL                   |  |  |

**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 checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Deepen                    |
| <input type="checkbox"/> Final Abandonment Notice     | <input type="checkbox"/> Fracture Treat            |
|   | <input type="checkbox"/> Production (Start/Resume) |
|   | <input type="checkbox"/> Reclamation               |
|   | <input type="checkbox"/> Water Shut-Off            |
|   | <input type="checkbox"/> Casing Repair             |
|   | <input type="checkbox"/> New Construction          |
|   | <input type="checkbox"/> Recomplete                |
|   | <input type="checkbox"/> Well Integrity            |
|   | <input type="checkbox"/> Change Plans              |
|   | <input type="checkbox"/> Plug and Abandon          |
|   | <input type="checkbox"/> Temporarily Abandon       |
|   | <input checked="" type="checkbox"/> Other          |
|   | <input type="checkbox"/> Convert to Injection      |
|   | <input type="checkbox"/> Plug Back                 |
|   | <input type="checkbox"/> Water Disposal            |
|   | <input type="checkbox"/> Well Spud                 |

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 recompleat 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 recompleat 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.)

4/03/2009 Spud Well; Drill 90'-790'  
4/04/2009 Drill 790'-1005'; Run 8-5/8" 24# surf. csg. from surface to 1000' w/ 370 sx C lead cmt & 200 sx C tail cmt. Circ. to surface. WOC.  
4/05/2009 WOC; Drill 1005'-2615'  
4/06/2009 Drill 2615'-3768'  
4/07/2009 Drill 3768'-4405'  
4/08/2009 Run 5-1/2" 17# prod. csg. from surface to 4405' w/ 600 sx C lead cmt & 200 sx C tail cmt. Second stage w/ 200 sx C circ. to surface. RDMO.

**RECEIVED**

APR 28 2009

**HOBBSOCD**

|  |                             |
|--|-----------------------------|
| 14. I hereby certify that the foregoing is true and correct.   |                             |
| Electronic Submission #68888 verified by the BLM Well Information System<br>For CONOCOPHILLIPS COMPANY, sent to the Hobbs<br>Committed to AFMSS for processing by KURT SIMMONS on 04/14/2009 (09KMS0645SE) |                             |
| Name (Printed/Typed) JALYN N FISKE   | Title REGULATORY SPECIALIST |
| Signature (Electronic Submission)  | Date 04/14/2009             |

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

|   |                                      |                 |
|---|--------------------------------------|-----------------|
| Approved By <b>ACCEPTED</b>   | JAMES A AMOS<br>Title SUPERVISOR EPS | Date 04/25/2009 |
| 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 Hobbs <i>KZ</i>               | 2009            |

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.

**\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\***