

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division

1625 N. French Dr.  
Hobbs, NM 88240

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

**SUBMIT IN TRIPLICATE**

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other Injection Well	5. Lease Designation and Serial No. LC 031670A
2. Name of Operator ConocoPhillips Co.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 4001 Penbrook, Odessa, TX 79762 (915) 368-1371	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T. R. M. or Survey Description) 2310' FSL & 330' FEL, SEC. 19, T20S, R38E, 1	8. Well Name and No. SEMU McKee #57
	9. API Well No. 30-025-07825
	10. Field and Pool, or Exploratory Area Warren McKee Simpson
	11. County or Parish, State Lea, NM

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other Renew TA Status	<input type="checkbox"/> Dispose Water

Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

ConocoPhillips requests renewal approval of Temporary Abandonment status for the above referenced well. A valid MIT was run on 1/15/02 and should be on file with your office.

We wish to retain this wellbore while continuing to evaluate the Yates and Seven Rivers potential. This evaluation should be completed within the next 18-24 months.

RECEIVED  
Hobbs  
OCD

TA Approved For 12 Month Period  
Ending 1/15/04

14. I hereby certify that the foregoing is true and correct		Kristy S. Ward	Date 1/15/03
Signed	<i>Kristy S. Ward</i>	Title Regulatory Assistant	
(This space for Federal or State office use)			
Approved by (ONG SGD) JOE G. LARA		Title	Date 3/4/03
Conditions of approval if any:			

BLM(6), NMOCDA, SHEAR, PROD ACCTG, COST ASST, FIELD, FILE ROOM

Title 18 U.S.C. Section 1001, makes 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.

\*See Instruction on Reverse Side

