

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

BLM. Oil (18. Division)
1625 N. French Dr.
Hobbs, NM 88240

FORM APPROVED
OMB No. 1004-0135
Expires July 31, 1996

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.

Lease Serial No. 95A
LC 031670a

SUBMIT IN TRIPLICATE - Other Instructions on reverse side

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Conoco Inc.

3a. Address

10 Desta Dr. Ste 100W Midland, TX

3b. Phone No. (include area code)

915-686-5424

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

U.L. "F", 1980' FNL & 1980' FWL
Section 30, T-20S, R-38E

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.

S.E.M.U. #16

9. API Well No.

30-025-07863

10. Field and Pool, or Exploratory Area

Skaggs Grayburg

11. County or Parish, State

Lea County, NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

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

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 zone. 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 day 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.)

1. Circulate the hole with gelled brine mud.
2. Spot 25 sxs cement 2480'-2730' on top of C.I.B.P.
3. Perforate the 5 1/2" casing at 1443'.
4. Set a cement retainer at 1343' and squeeze 30 sxs cement thru perfs at 1443'. TAG
5. Perforate the 5 1/2" casing at 341'.
6. Circulate 75 sxs cement thru perfs at 341' to surface.
7. Install dryhole marker and clear location.

14. I hereby certify that the foregoing is true and correct

Name (Printed/Typed)

Reesa Wilkes

Title

Sr. Staff Regulatory Asst.

Signature

Reesa Wilkes

Date

4-13-00

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

(ORIG. SGD) ALEXIS C. SWOBODA

Title

PETROLEUM ENGINEER

Date

APR 14 2000

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

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.

(Instructions on reverse) CC BLM(6), OCO(1), SHEAR, POUCH, COST ASST, FILE ROOM

CWW

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