

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

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

CONCHO RESOURCES INC.

3. Address and Telephone No.

110 W. LOUISIANA STE 410; MIDLAND, TX 79701 (915) 683-7443

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

various (see below)

5. Lease Designation and Serial No.
NM 86133

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Checkers '24' Federal Lease

9. API Well No.

various (see below)

10. Field and Pool, or Exploratory Area

various (see below)

11. County or Parish, State

Lea, NM

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

TYPE OF SUBMISSION

- ☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other surface commingle gas prod
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

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

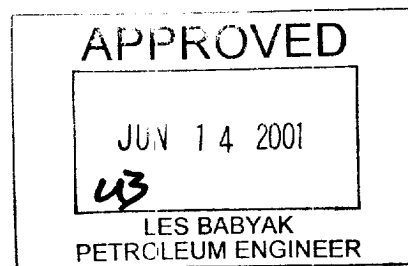
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to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

Concho Resources Inc. respectfully requests approval to commingle the gas production from the following wells according to the attached documents:

Checkers 24 Federal No. 1
API: 3002532945
Pool: Red Tank Bone Spring

Checkers 24 Federal No. 7
API: 3002534023
Pool: Red Tank Bone Spring

Checkers 24 Federal No. 5
API: 3002533702
Pool: West Red Tank Delaware



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

Signed [Signature] Title Production Analyst Date 05/31/01

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any:

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

RECEIVED
2001 JUN -1 AM 9:45
BUREAU OF LAND MGMT.
ROSWELL OFFICE