

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

M. Oil Co's. Division  
1625 N. French Dr.  
Hobbs, NM 88240

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

5. Lease Designation and Serial No.  
NM97891

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.  
Tomcat '17' Federal #4

9. API Well No.  
30025-34812

10. Field and Pool, or Exploratory Area  
Sand Dunes- Bone Spring

11. County or Parish, State  
Lea, NM

**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)  
2080' FSL & 2080' FEL, SEC. 17, 23S, 32E.

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

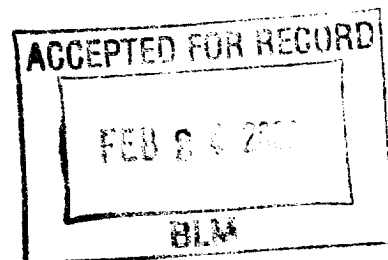
- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☒ Other Spud & Set Surf Csg  
☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

(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.)

02-10-00 Spud well @ 10:00 PM MST.

02-12-00 RIH w/ 13-3/8" csg & set @ 670' & cmt w/ LEAD: 400 sx cmt w/ 35/65 POZ C w/ 6% gel, 2% salt, .25# Celloflakes.  
TAIL: 250 sx C w/ 2% CaCL, 2% gel. Circ 130 sx to pit.



(ORIG. SGD.) GARY GOURLEY

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

Signed [Signature] Title Production Analyst Date 02/16/00

(This space for Federal or State office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
Conditions of approval, if any:

GWW

RECEIVED

2000 FEB 22 A 10:04

BUREAU OF LAND MGMT.  
ROSWELL OFFICE

2000 FEB 22 A 10:04  
BUREAU OF LAND MGMT.  
ROSWELL OFFICE