Form 3160-3 (August 1999)

FORM APPROVED OMB No. 1004-0136 Expires November 30, 2000

## **UNITED STATES**

DEPARTMENT OF	THE INTERIOR  D MANAGEMENT	
BUREAU OF LANI	D MANAGEMENT	5. Lease Serial No. LC 031740 B
APPLICATION FOR PERMIT TO DRILL OR REENTER		6. If Indian, Allottee or Tribe Name
la. Type of Work: 🛛 DRILL 🔲 REENTER		7. If Unit or CA Agreement, Name and No.
		8. Lease Name and Well No. MEYER B4 35
	Other Single Zone Multiple Zone	9. API Well No.
2. Name of Operator CONOCO INC.	E-Mail: kim.j.southall2@conoco.com	30-025-35908
3a. Address 10 DESTA DRIVE, SUITE 607W MIDLAND, TX 79705	3b. Phone No. (include area code) Ph: 915.686.5565 Fx: 915.686.6503	10. Field and Pool, or Exploratory WILDCAT STRAWN
4. Location of Well (Report location clearly and in acco	rdance with any State requirements.*)	11. Sec., T., R., M., or Blk. and Survey or Area
At surface 2210FSL 2040FWL	C	Sec 4 T21S R36E Mer NMP
At proposed prod. zone	حر	
14. Distance in miles and direction from nearest town or po	ost office*	12. County or Parish LEA 13. State NM
15. Distance from proposed location to nearest property or lease line, ft. (Also to nearest drig. unit line, if any)	16. No. of Acres in Lease	17. Spacing Unit dedicated to this well
18. Distance from proposed location to nearest well, drilling	ng, 19. Proposed Depth	20. BLM/BIA Bond No. on file
completed, applied for, on this lease, ft.	8900 MD	
21. Elevations (Show whether DF, KB, RT, GL, etc. 3582 GL	22. Approximate date work will start	23. Estimated duration
	24. Attachments	Company of the state of the sta
The following, completed in accordance with the requiremen		nty Controlled Weter Basin
<ol> <li>Well plat certified by a registered surveyor.</li> <li>A Drilling Plan.</li> <li>A Surface Use Plan (if the location is on National Forest Supposed Supposed by Supposed Su</li></ol>	4. Bond to cover the operati Item 20 above).  System Lands, the 5. Operator certification	ons unless covered by an existing bond on file (see
25. Signature (Electronic Submission)	Name (Printed/Typed) KIM SOUTHALL Ph: 915.686.5565	Date 03/25/2002
Title ASSOCIATE ASSISTANT		
Approved by (Signature)	Name (Printed/Typed)	Date
/S/ JOE G. LARA	Office /S/ JOE G. LAF	RA MAY 0.8
TING FIELD MANAGER	CARLSBAD FIFLD	OFFICE
Application approval does not warrant or certify the applicar	nt holds legal or equitable title to those rights in the subject	lease which would entitle the applicant to conduct
operations thereon. Conditions of approval, if any, are attached.	APPF	ROVAL FOR 1 YEAR
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 12 States any false, fictitious or fraudulent statements or representations.	12, make it a crime for any person knowingly and willfully entations as to any matter within its jurisdiction.	to make to any department or agency of the United
Additional Operator Remarks (see next page)		
Electronic Subn	nission #10759 verified by the BLM Well Info	mation System
LARED GATER BASIN,	For CONOCO INC., will be sent to the Roswel	OVAL SUBJECT TO
ENY BEHIND THE 8%		ERAL REQUIREMENTS AND
NG MUST BE CIRCULATED	or EC	ial Supulations
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FOR CONTRACT

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