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Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources	WELL API NO.
District II	OIL CONSERVATION DIVISION	30-039-27864
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr.	5. Indicate Type of Lease STATE   FEE   X
1000 Rio Brazos Rd, Aztec, NM 87410 District IV	Santa Fe, NM 87505	STATE FEE X  6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		
SUNDRY NOTICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		SAN JUAN 29-6 UNIT
1. Type of Well: Oil Well Gas Well X Other		8. Well Number 62B
Name of Operator     ConocoPhillips Company		9. OGRID Number 217817
3. Address of Operator 5525 Highway 64		10. Pool name or Wildcat
Farmington	, ŃM 87401	BLANCO MESAVERDE
4. Well Location  Unit Letter G: 1783 feet from the FNL line and 2029 feet from the FEL line		
Section 4	Township 29N Range 6W	NMPM CountyRIO ARRIBA
100 100 100 100 100 100 100 100 100 100	11. Elevation (Show whether DR, RKB, RT, GR, e	,
Pit or Below-grade Tank Application ☐ or	6390 GL	The state of the s
	erDistance from nearestfreshwater well	Distancefrom neares surfacewater
Pit Liner Thickness: mil Below-GradeTank: Volume bbls; ConstructionMaterial		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING		
TEMPORARILY ABANDON	CHANGE PLANS COMMENCE	DRILLING OPNS. P AND A
PULL OR ALTER CASING	MULTIPLE COMPL   CASING/CEME	ENT JOB
OTHER:	OTHER:SPUD	
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date		
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.		
ConocoPhillips spud this well on 03/	21/2005 at 0730 HRS.	
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		MAR 2005
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I harshy soutify that the information of	have in the conditional to the best of conditional	ada and hali 6 de ut
gradetank has been will be constructed or o	bove is true and complete to the best of my knowle losedaccording to NMOCD guidelines □, a general permit	t  or an (attached) alternative OCD-approvedplan .
SIGNATURE HUMENT January	TITLE Regulatory Analyst	t DATE <u>03/22/2005</u>
Type or principame Juanita Farrell	E-mail address:juanita.r.fa	Parrell@conocophillipEclophone No. (505)599-3419
For State Use Only	SUPERVISOR DI	ISTRICT # 3 MAR 2 5 2005
APPROVED BY: Chall &	TITLETITLE	DATE CULT