Submit 3 Copies 10 Appropriate District Office District Energy	State of New Mexico  gy, Minerals and Natural Resources	Form C-103 May 27, 2004
1625 N. Erench Dr., Hobbs, NM 88240	25 N. French Dr., Hobbs, NM 88240	
	CONSERVATION DIVISION	30-045-32977  5. Indicate Type of Lease
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr. Santa Fe, NM 87505	STATE X FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa 1.6, MW 87303	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS (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.)		7. Lease Name or Unit Agreement Name SAN JUAN 32-7 UNIT
1. Type of Well: Oil Well Gas Well X Other		8. Well Number 250A
Name of Operator     ConocoPhillips Company		9. OGRID Number 217817
3. Address of Operator 5525 Highway 64 Farmington, NM 87401		10. Pool name or Wildcat BASIN FRUITLAND COAL
4. Well Location		Brish TROTTE AND CORE
Unit Letter F: 1450 feet from the FNL line and 1565 feet from the FWL line		
	Township 32N Range 7W tion (Show whether DR, RKB, RT, GR, etc.	NMPM CountySAN JUAN
6659		
Pit or Below-grade Tank Application or Closure  Pit type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water		
Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK  PLUG AND ABANDON  REMEDIAL WORK  ALTERING CASING		
TEMPORARILY ABANDON   CHANGE	— !	ILLING OPNS. P AND A
PULL OR ALTER CASING   MULTIPL	E COMPL	T JOB
OTHER: OTHER:Spud Report X		
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 05/05/2005 at 1730 HRS.		
MAY 2005		
COLOCOVA DIV.		
2021292 Section 1980		
I hereby certify that the information above is tru grade tank has been/will be constructed or closed accord	e and complete to the best of my knowledg ing to NMOCD guidelines ☐, a general permit ☐	ge and belief. I further certify that any pit or below- or an (attached) alternative OCD-approved plan
SIGNATURE June Faire	TITLE Regulatory Analyst	DATE 05/09/2005
Type or print name Juanita Farrell	E-mail address: juanita.r.farr	ell@conocophilli <b>pEdoph</b> one No. (505)599-3419
For State Use Only		
APPROVED BY: Chalit TITLE TITLE DATE		
Conditions of Approval (if any):		<del>-</del>