District I Energy, Mine 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources 5 N. French Dr., Hobbs, NM 88240	
District III 1220 Sc	OIL CONSERVATION DIVISION  OIL CONSERVATION DIVISION	
1000 Rio Brazos Rd., Aztec, NM 87410  District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505  Santa Fe, NM 87505		STATE FEE X  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 29-5 Unit
1. Type of Well: Oil Well Gas Well Other		8. Well Number 45F
2. Name of Operator ConocoPhillips Co.		9. OGRID Number 217817
3. Address of Operator P.O. Box 2197, WL3-6081 Houston, Tx 77252		10. Pool name or Wildcat Blanco Mesaverde/Basin Dakota
4. Well Location		
Unit Letter J: 1815 feet from the South line and 1860 feet from the East line		
Section 22 Township		NMPM CountyRio Arriba
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6745		
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:		- · · · · ·
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	☐ COMMENCE DRIL ☐ CASING/CEMENT	<u> </u>
PULL OR ALTER CASING	☐ CASING/CEMENT	JOB 🖾
OTHER:	☐ OTHER:	
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 set casing on this well as per attached wellbore schematic.		
Conocor minps set casing on this wen as per attached wer	nbore schematic.	
	16.8T	Service Control of the Control of th
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan.		
SIGNATURE Chin Quitontis	TITLE Regulatory Analyst	DATE <u>07/25/2005</u>
Type or print name Christina Gustartis For State Use Only	E-mail address: christina.gustar	rtis@conocophillielsphune No. (832)486-2463
	SUPPRINCAR RIATE	JUL 26 2005
APPROVED BY: Nach / Jesse' Conditions of Approval (if any):	SUPERVISOR DISTRIC	T#3 DATE