Susana Martinez Governor

David Martin Cabinet Secretary-Designate

Brett F. Woods, Ph.D. Deputy Cabinet Secretary Jami Bailey, Division Director Oil Conservation Division



New Mexico Oil Conservation Division approval and conditions listed below are made in accordance with OCD Rule 19.15.7.11 and are in addition to the actions approved by BLM on the following <u>3160-4 or 3160-5</u> form.

Operator Signature Date:

Application Type:

| P&A | Drilling/Casing Change Recomplete/DHC |
|----------------|--|
| 🗌 Locati | ion Change 🔀 Other: <u>TA Status Extension</u> |

Well information:

| API WELL # | Well Name | Well # | Operator Name | Туре | Stat | County | Surf_Owner | UL | Sec | Twp | N/S | Rng | W/E | Feet | NS | Ft | EW |
|---------------|-----------------|-----------|----------------|------|------|--------|---|----|-----|-----|-----|-----|-----|------|----|-----------------|----|
| 30-039- | SAN JUAN | 055 | CONOCOPHILLIPS | G | Т | Rio | F | F | 27 | 31 | N | 6 | W | 1496 | Ν | 1782 | W |
| 26990-00- | 31 6 UNIT | | COMPANY | | | Arriba | | | | | | | | | | | |
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Conditions of Approval:

NMOCD TA Status Expires on 11-24-2014

DEC 1-8 2013

NMOCD Approved by Signature

Date

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| PO Box 4289, Farmington, NM 87499 (506) 326-9700 Rosa Pictured Cliffs 1. Joardian of Well (Plonage, Siz, T.R.M. or Survey Description) 11. Chantay or Patish, Sate New Mexico 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA TYPE OF SUBMISSION Water Shan Off 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA TYPE OF SUBMISSION Water Shan Off 13. Describe Proposed for Complete Calage Report Complete Other T & Status 13. Describe Proposed for Completed Operation. Clearly state all patients deals, including estimated status of the proposed work and approximate dual to file of the proposed work and approximate dual to file of the proposed work and approximate dual to file of the proposed for Completed Operation. The proposed work and the dual to file of the proposed work and approximate dual to file of the proposed work and approximate dual to file of the proposed work and the dual to file of the proposed work and approximate dual to file of the proposed work and approximate dual to file of the proposed work and the dual to file of the proposed work and the dual to file of the proposed work and approximate dual to expect the the dual to file of the proposed work and the dual to file of the proposed work and the dual to file of the proposed work and the dual to file of the proposed work and the dual to file of the dual to file of the proposed work and the dual to file of the dual | 3a. Address | | | area code) | <u>↓ · · · · · · · · · · · · · · · · · · ·</u> | |
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| If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent makers and zones. Attach the bood under which the work will be performed or provide the Bond No. on file with BLM/BLA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation reusins in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed one Testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.) The subject well was TA'd on 11/24/09. ConocoPhillips requests permission to extend the temporary abandoned status to review for future uphole potential. TA grave I Varia I I2/1/19 14. 1 hereby certify that the foregoing is true and correct. Name (Printed/Typed) Dollie L. Busse Title Staff Regulatory Technician Unital Space E FOR FEDERAL OR STATE OFFICE USE Approved by Original Signed: Stapproval of this notice does not warrant or certify that the applicant to charled with notice does not warrant or certify that the applicant holds legal or equivable title to here rights in the subject lease within would Title Data MAOY 2 3 2313 Conditions of approval, If any, are attached. Approval of this notice does not warrant or certify that applicant to conduct operatio | | | | | | |
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| OIL CONS. DIV. DIST. 3 14. Thereby certify that the foregoing is true and correct. Name (Printed/Typed) Dollie L. Busse Title Staff Regulatory Technician Signature Outle J. Busse Title Staff Regulatory Technician Signature Outle J. | | | | | | |
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| 14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) Dollie L. Busse Signature WILLO June 11/21/13 THIS SPACE FOR FEDERAL OR STATE OFFICE USE Approved by Original Signed: Stephen Mason Title Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable tilte to those rights in the subject lease which would entitle the applicant to conduct operations thereon. Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction. | | | | | | ULL CUNS. DIV. |
| Dollie L. Busse Title Staff Regulatory Technician Signature Julie Julie Julie Julie Julie Millie Julie | | | | | | DIST. 3 |
| Signature Ullizity Date 11/21/12 THIS SPACE FOR FEDERAL OR STATE OFFICE USE Approved by Title Date NOV ? 3 2013 Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon. Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction. Date NOV ? 3 2013 | 14. I hereby certify that the foregoing is | s true and correct. Name (Printed/Type | d) | | | |
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