Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103	
District I	Energy, Minerals and Natural Resource	ces	May 27, 2004	
1625 N. French Dr., Hobbs, NM 88240 District II			039-29274	
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	7. Indicate Type of Lea	se	
District III' 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE X	FEE 🗌	
District IV	Santa Fe, NM 87505	6. State Oil & Gas Leas	e No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505				
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.)			Agreement Name	
1. Type of Well: Oil Well Gas Well X Other		8. Well Number 60G		
2. Name of Operator ConocoPhillips Co.		9. OGRID Number 21	9. OGRID Number 217817	
3. Address of Operator P.O. Box 2197, WL3-6085 Houston, Tx 77252			10. Pool name or Wildcat Blanco Mesaverde/Basin Dakota	
4. Well Location		<u> </u>		
Unit Letter F:	1900 feet from the North line ar	nd 1700 feet from the	West line	
Section 32	Township 29N Range 5W		ntyRio Arriba	
Pit or Below-grade Tank Application	11. Elevation (Show whether DR, RKB, RT, G 6504' GL	R, etc.)		
	vaterDistance from nearest fresh water well	Distance from noarest surface wat	O.W.	
Pit Liner Thickness: mil		bls; Construction Material	,r	
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	—	RING CASING	
TEMPORARILY ABANDON	I	CE DRILLING OPNS. P ANI) A 🗆	
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CI	EMENT JOB		
OTHER:		oduction Start Up	<u>X</u>	
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 starting any proposed we or recompletion.	ork). See RULE 1103. For Multiple Completio	ns: Attach wellbore diagram of p	roposed completion	
Date of First Sales 12/19/2005 Casing Pressure 735 psi Tubing Pressure 898 psi				
Meter No. 83889-012	210 10 20 22			
Transporter Williams Field Service	* 10 00 00 00 00 00 00 00 00 00 00 00 00			
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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 Chi Qu	TITLE Regulatory Spec	cialist DAT	E_12/20/2005	
Type or print name Christina Gusta For State Use Only	rtis E-mail address; christin	na.gustartis@conocophilligle.phm	e No. (832)486-2463	
APPROVED BY: H. VIII	anueva TITLE	NSPECTOR, DIST. &	EDEC 21 2005	

APPROVED BY: H. Villanueva Conditions of Approval (if any):