Submit 3 Copies To Appropriate District Office	State of New Mexico			Form C-103 Jun 19, 2008
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		WELL API NO.	
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate T	30-045-35580
District III	1220 South St. Francis Dr.		S. Indicate I STAT	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505			& Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505			E-4426-49	
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			7. Lease Name or Unit Agreement Name State Com M	
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other			8. Well Number 9C	
2. Name of Operator			9. OGRID Number	
ConocoPhillips Company			217817	
3. Address of Operator P.O. Box 4289, Farmington, NM 87499-4289			10. Pool name or Wildcat Blanco Mesaverde / Basin Dakota	
4. Well Location				
Unit Letter J : 2507	feet from the South	line and 17	13 feet fro	m the <u>East</u> line
Section 36		Range 11W	NMPM	San Juan County
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6218' GR				
12. Check At	propriate Box to Indicate M	Nature of Notice	Report or Ot	her Data
	PLUG AND ABANDON CHANGE PLANS CHANGE PLANS CHANGE PLANS	REMEDIAL WOR COMMENCE DR CASING/CEMEN	RILLING OPNS.	ALTERING CASING [] ' P AND A []
OTHER: APD EXTENSION		OTHER:		
 Describe proposed or completed of starting any proposed work or recompletion. 	ted operations. (Clearly state all s). SEE RULE 1103. For Multiple state of the state of the		ttach wellbore o	liagram of proposed completion
ConocoPhillips requests perm	nission to extend the APD approv	val for the subject w	vell. OIL	CONS. DIV DIST. 3
				JUN 0 3 2016
Spud Date:	Pig Pal	leased Date:		
Fil. A		laclaste		
I hereby certify that the information at	ove is true and complete to the b	best of my knowled	ge and belief.	
SIGNATURE Julio	Busse TITLE_	Regulatory Tech	nician DATE	6/1/16
	_E-mail address: dollie	.l.busse@conocoph	illips.com PH	ONE: 505-324-6104
For State Use Only	(//// D	EPUTY OIL 8	GAS INSP	ECTOR
APPROVED BY:	TITLE	DISTR		DATE 6/3/16
Conditions of Approval (if any):	A	1		
				1
Andrew He	lurrent regular	hens at th	medf	spud
comply wron	/			

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ADHERE TO PREVIOUS NMOCD CONDITIONS OF APPROVAL