Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natu	iral Resources	Revised July 18, 2013 WELL API NO.
<u>District II</u> – (575) 748-1283	<u>District II</u> – (575) 748-1283		30-045-30427
District III - (505) 334-6178	District III – (505) 334-6178 1220 South St. Francis Dr.		5. Indicate Type of Lease STATE FEE □
1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460 Santa Fe, NM 87505		6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM 87505		262994	
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 STATE COM P
1. Type of Well: Oil Well Gas Well Other			8. Well Number 12M
2. Name of Operator ConocoPhillips Company			9. OGRID Number 217817
3. Address of Operator P.O. Box 4289, Farmington, NM 87499			10. Pool name or Wildcat Basin DK / Blanco MV
4. Well Location			
Unit Letter K: 1870 feet from the South line and 1845 feet from the West line.			
Section 36 Township 29N Range 8W NMPM County San Juan			
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6188 GL			
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 WORL			
TEMPORARILY ABANDON			
			T JOB
CLOSED-LOOP SYSTEM ☐ OTHER: ☑ RE-		DELIVERY	
OTHER: 13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated dates)			
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.			
proposed compression			
This well was shut in for more than 90 days waiting on well work. Returned to production on 4/18/2017.			
TP: 235 CP: 275 Initial MCF: 312			OIL CONS. DIV DIST. 3
Meter No.: 98323 Gas Co.: ENT			OIL CONS. DIV DIST. 3
			APR 25 2017
Project Type: REDELIVERY			
Spud Date:	Rig Release Da	ite:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE Wishing Stock TITLE Regulatory Specialist DATE 4 2017			
Type or print name <u>Christine Brock</u> E-mail address: <u>Christine.Brock@cop.com</u> PHONE: <u>505-326-9775</u>			
For State Use Only			
APPROVED BY COM COLLEGE DATE			
Conditions of Approval (if any):			