

Submit 1 Copy To Appropriate District Office
District I – (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II – (575) 748-1283
811 S. First St., Artesia, NM 88210
District III – (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV – (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OCD – Hobbs – REC'D 5/27/2020

Form C-103
Revised July 18, 2013

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. Multiple Wells – See Description
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B0-2148-0003
7. Lease Name or Unit Agreement Name LEAMEX
8. Well Number Multiple Wells – See Description
9. OGRID Number 217817
10. Pool name or Wildcat MALJAMAR;GRAYBURG-SAN ANDRES
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator ConocoPhillips Company	
3. Address of Operator PO Box 2197 Houston, TX 77252	
4. Well Location Multiple Locations – See Description	
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: Notice of Shut-In – Multiple Wells <input checked="" type="checkbox"/>		OTHER: <input type="checkbox"/>	

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

ConocoPhillips Company respectfully requests approval to shut in the wells listed below which are producing from Leamex Lease; located in Lea County, NM, at 17S, 33E. This request is prompted by matters beyond reasonable control of the lessee. The current worldwide supply/demand ratio and lack of storage capacity is compounded by the COVID-19 national emergency. Our expectation is that the lack of storage capacity and low commodity price will be temporary in nature. We are requesting the flexibility to maintain these wells in shut-in status until they once again reach economic viability. This lease and wells are capable of producing oil as evidenced by recent production reports. We seek to perpetuate the lease due to the wells capability to produce and that this cessation of production is temporary.

Shut in to begin 6/1/2020. Production will resume when market conditions improve and storage constraints ease.

LEAMEX 49	30-025-30426	T17S-R33E: Section 21: UL G
LEAMEX 50	30-025-30427	T17S-R33E: Section 21: UL K
LEAMEX 51	30-025-30428	T17S-R33E: Section 21: UL O
LEAMEX 52	30-025-30467	T17S-R33E: Section 25: UL D
LEAMEX 53	30-025-30453	T17S-R33E: Section 25: UL F

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Coby Lee Lazarine TITLE Regulatory Coordinator DATE 5/26/2020

Type or print name Coby Lee Lazarine E-mail address: coby.l.lazarine@conocophillips.com PHONE: 281-206-5324
For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____
Conditions of Approval (if any): _____