Submit One Copy To Appropriate District Office District 1	ffice istrict I 525 N. French Dr., Hobbs, NM 882400BBS OCD Energy, Minerals and Natural Resources			Form C-103 Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240 OBBS OCD			WELL API NO.	30-025-32697
Bit Strict IIIMAR 2 5 20151220 South St. Francis Dr.District IIISanta Fe, NM 87505		cis Dr.	5. Indicate Type of STATE	FEE
		505	6. State Oil & Gas	s Lease No.
District IV 1220 S. St. Francis Dr., Santa Fc, NM RECEIVED 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			7. Lease Name or Unit Agreement Name State A 19	
PROPOSALS.) 1. Type of Well: Oil Well X Gas Well Other			8. Well Number	002 🧹
2. Name of Operator ConocoPhillips Company			9. OGRID Numbe	er 217817
3. Address of Operator P. O. Box 51810 Midland, TX 79710		10. Pool name or	Wildcat	
			Eumont Yates 7 Rvrs Queen Gas	
4. Well Location				
Unit Letter L : 1760 feet from the South line and 624 feet from the West line				
Section <u>19</u> Township <u>19S</u> Range <u>37E</u> NMPM County <u>Lea</u> 11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
3645' GL				
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF INTENTION	ABANDON	SUBS REMEDIAL WORK COMMENCE DRIL CASING/CEMENT		PORT OF: ALTERING CASING D P AND A
		\square Leastian is so	adu far OCD inana	ation often DSA
OTHER: Image: Content of the conten				
<u>OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR</u> <u>UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR</u> <u>PERMANENTLY STAMPED ON THE MARKER'S SURFACE.</u>				
The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and				
other production equipment.				
 Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level. If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with 				
OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed from lease and well location.				
All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have				
to be removed.) $\overline{\mathbf{X}}$ All other environmental concerns have been as	ddressed as per OCD	rules.		
Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non-retrieved flow lines and pipelines.				
retrieved flow fines and piperines.				
When all work has been completed, return this form to the appropriate District office to schedule an inspection.				
SIGNATURE Monke one	J	ff Regulatory Techr	nician	DATE <u>03/23/2015</u>
TYPE OR PRINT NAME <u>Rhonda Rogers</u>	E-MAIL:	rogerrs@conocoph	illips.com P	HONE: <u>(432)688-9174</u>
APPROVED BY: Maluft	ImTITLE_C	ompliance (Hicer	DATE 3/30/15

APR 0 7 2015