Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
District I (575) 303 6161	Minerals and Natural Resources	Revised August 1, 2011 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283	ONCEDIA TION DIVIGION	30-025-38986
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.		5. Indicate Type of Lease
Too Ito Blacks Italy I Later, I like the Later L		STATE FEE 6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM	Suita 1 0, 1111 0 7 5 0 5	6. State Off & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name
(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.)		MCA UNIT
1. Type of Well: Oil Well Gas Well Gother INT WELL		8. Well Number 418
Name of Operator ConocoPhillips Company		9. OGRID Number 217817
3. Address of Operator _{P. O. Box 51810} Midland, TX 79710		10. Pool name or Wildcat
4. Well Location		MALJAMAR
	t from the SOUTH line and 660	feet from the WEST line
	wnship 17S Range 32E	NMPM County LEA
11. Elevation	n (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 PLUG AND		
TEMPORARILY ABANDON CHANGE PL	_	
PULL OR ALTER CASING MULTIPLE C DOWNHOLE COMMINGLE	COMPL CASING/CEMENT	JOB []
_	_	_
OTHER:	OTHER: 5 YEAR	
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.		
2/15/17 CONOCOPHILLIPS COMPANY CONDUCTED THE 5 YEAR MIT TO 600#/32 MINS - TEST GOOD. CHART		
ATTACHED		
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 Thanks Oleven	TITLE Staff Regulatory Technicia	n DATE 03/02/2017
Type or print name Rhonda Rogers E-mail address: rogerrs@conocophillips.com PHONE: (432)688-9174 For State Use Only		
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APPROVED BY: John DATE 3/8/17 Conditions of Approval (if any):		
Conditions of Approval (it ally).		

