Submit One Copy To Appropriate District	State of New Me	vico		Form C-103
Office	Energy, Minerals and Natural Resources			Revised August 1, 2011
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	Enoigy, minorals and read		WELL API NO.	30-025-30886
District II	District II			
811 S. First St., Grand Ave., Artesia, NM OIL CONSERVATION DIVISION 88210 HOBBS OCD 1220 South St. Francis Dr.			5. Indicate Type of STATE X	
District III			STATE X 6. State Oil & Gas 1	
1000 Rio Brazos Rd., Aztec, NM 87410 District IV DEC 0 3 2012		o. State Off & Cas	Lease Ivo.	
District IV 1220 S. St. Francis Dr., Santa Fe, NMEC 0 3 2 87505	, O 16.		301247	
0.003			7. Lease Name or U	Jnit Agreement Name
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			BILBREY 32 STAT	'E COM
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other			8. Well Number	001
2 Name of Operator			9. OGRID Number	217817
ConocoPhillips Company			10 DI W	
3. Address of Operator 3300 N. A Street, Building 6; Midland, TX 79705-5406			10. Pool name or W BILBREY, ATOKA	
4. Well Location				
	et from the North line and 19	80 feet from the We	est line	/
	21S Range 32e NMPM			,
	Elevation (Show whether DR,		1:21	The state of the s
2 Marie 19 10 10 10 10 10 10 10 10 10 10 10 10 10	742 (GL)		g fine control	100 m
12. Check Appropriate Box to Indi	cate Nature of Notice, Re	eport or Other Da	ita	
NOTICE OF INTEN	ITION TO:	SUBS	EQUENT REP	ORT OF
PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☒ REMEDIAL WORK ☐ ALTERING CASI				
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRIL			LING OPNS. P	AND A
PULL OR ALTER CASING MU	LTIPLE COMPL	CASING/CEMENT	JOB 🗌	
OTHER:	П	☑ Location is rea	ady for OCD inspec	tion after P&A
OTHER: Description Descri				
Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.				
X A steel marker at least 4" in diameter	and at least 4' above ground l	evel has been set in	concrete. It shows the	ne
OPERATOR NAME LEASE I	NAME WELLNIMBER A	PLNUMBER OU	ARTER/OHARTER	R LOCATION OR
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR				
PERMANENTLY STAMPED ON THE MARKER'S SURFACE.				
V The leasting has been leveled as many	lu ao maraikla ta aniainal anaw	ad contoin and has b	an alasmad af all inn	ale track flow lines and
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	s pit permit and closure plan.	All flow lines, produ	ction equipment and	junk have been removed
from lease and well location. X All metal bolts and other materials have	ve heen removed. Portable has	ses have been remov	ed (Poured onsite co	oncrete hases do not have
to be removed.)	ve occii removed. I ortable ba.	ses have been temov	ca. (1 oarea onsite et	merete bases do not have
X All other environmental concerns have				
Pipelines and flow lines have been ab	andoned in accordance with 1	9.15.35.10 NMAC.	All fluids have been	removed from non-
retrieved flow lines and pipelines.				
When all work has been completed, return	this form to the appropriate D	District office to sche	dule an inspection.	
			•	
SIGNATURE	TITLE RE	GULATORY SPEC	D. D. CIALIST	ATE 11/29/2012
TYPE OR PRINT NAME GUSTAVO FE	EJERVARY E-MAIL:	g.fejervary@conoco	ophillips.com PH	ONE: <u>(432)688-9012</u>
For State Use Only	/·		<u>~</u>	
APPROVED BY: Wal With	title /	ouphance C	Hicer 1	DATE 12-04-2012
Conditions of Approval (if any):				<u> </u>