| Submit 1 Copy To Appropriate District | State of New Mexico | | Form C-103 | |
|--|--|----------------------------|--|--|
| Submit 1 Copy To Appropriate District Office District (-) (575) 393-6161 State of New Mexico Energy, Minerals and Natural Resources District II - (575) 748-1283 District II - (575) 748-1283 State of New Mexico Energy, Minerals and Natural Resources OIL CONSERVATION DIVISION | | sources WELL AI | Revised August 1, 2011 | |
| District II – (575) 748-1283 | OIL CONSERVATION DIVI | SION | 30-025-39403 | |
| 311 3. this 3t., Artesia, 1917 88210 | | _ 5. Indicat | e Type of Lease | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 WITH Santa Eq. NIM 97505 | | 91. | ATE FEE FEU Dil & Gas Lease No. | |
| <u> </u> | • | | | |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS | | | Federal Lease # NMLC057210 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.) | | K TO A MCA Unit | | |
| 1. Type of Well: Oil Well Gas Well X Other Injection | | | 8. Well Number 485 | |
| 2. Name of Operator ConocoPhillips Company | | 9. OGRII | 9. OGRID Number 217817 | |
| 3. Address of Operator P. O. Box 51810 | | 10. Pool i | 10. Pool name or Wildcat | |
| Midland, TX 79710 | | Maljamar; | Maljamar; Grayburg-San Andres | |
| 4. Well Location | | | | |
| Unit Letter K : 1860 | | | feet from the West line | |
| Section 28 Township 17S Range 35E 32e NMPM County Lea 11. Elevation (Show whether DR, RKB, RT, GR, etc.) | | | | |
| Transfer of the Strategic of the Strateg | 9' GR | KI, OK, etc.j | | |
| Despitation in the second seco | 2, 22 | | The state of the s | |
| 12. Check Appro | priate Box to Indicate Nature | of Notice, Report or | Other Data | |
| NOTICE OF INTENTION TO: SUBS | | | IT REPORT OF: | |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR | | EDIAL WORK | | |
| - | | MENCE DRILLING OPN | S. PANDA | |
| PULL OR ALTER CASING MULDOWNHOLE COMMINGLE | TIPLE COMPL CASI | NG/CEMENT JOB | | |
| DOWNHOLE COMMINGLE | | | | |
| OTHER: | □ OTHE | R: HIT & pkr repair | X | |
| 13. Describe proposed or completed of | perations. (Clearly state all pertiner EE RULE 19.15.7.14 NMAC. For I | | | |
| proposed completion or recomple | | viulupie Completions. A | Attach wendore diagram of | |
| · · · · · · · · · · · · · · · · · · · | | tion nkr and sent in to ha | ve rebuild 4/23/13 RIH w/116 | |
| ConocPhillips had experiences a MIT failure on above well. POOH w/injection pkr and sent in to have rebuild. 4/23/13 RIH w/116 jts 2 3/8", 4.6#, J-55 tbg & set @ 3755' & 5 1/2"x2 3/8" Injection pkr 7 set @ 3754'. 4/24/13 Charted MIT to 620#/31 mins- test | | | | |
| good. Witnessed by Patricia Hutchins w | /BLM & Maxey Brown w/OCD. Cl | nart attached. | | |
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| Spud Date: | Rig Release Date: | | | |
| | | | | |
| I hereby certify that the information above | is true and complete to the best of m | w knowledge and belief | | |
| Thereby certify that the information above |) | ly knowledge and belief. | | |
| | | | | |
| SIGNATURE // Or SA 39 | TITLE Staff Regulate | ry Technician | DATE <u>05/01/2013</u> | |
| Type or print name Rhonda Rogers | F-mail address: roge | rrs@conocophillips.com | PHONE: (432)688-9174 | |
| For State Use Only | | ,, | (132)000-7177 | |
| 5 | 11/ 1004 | mA | 200 1 / 2013 | |
| APPROVED BY Conditions of Approval (if any): | TITLE ST. | I KA'E | DATE 3-14-2013 | |
| Conditions of Approval (II ally) | | MAV | DATE 5-14-2013 | |
| | | MAY | 2.0 2013 Um | |

