Submit I Copy To Appropriate District Office	State of New Mexico		Form C-103	
Office District I – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 HOBBS DETEN, Minerals and Natural Resources			Revised August 1, 2011 WELL API NO.	
District II = (575) 748-1283			30-025-20516	
District II - (575) 748-1283 811 S. First St., Artesia, NM 88210 District III - (505) 334-6178 MAR 2 50415CONSERVATION DIVISION 1220 South St. Francis Dr.			5. Indicate Type of Lease	
1000 Pio Brazos Pd. Agtes. NM 87410			STATE X FEE	
District IV – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM RECEIVED			6. State Oil & Gas Lease No.	
87505			B-2229	
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 Philmex	
PROPOSALS.) 1. Type of Well: Oil Well Gas Well X Other Injection Well			8. Well Number 009	
2. Name of Operator ConocoPhillips Company			9. OGRID Number 21781	7
3. Address of Operator P. O. Box 51810			10. Pool name or Wildcat	
Midland, TX 79710			Maljamar; GB-SA	
4. Well Location				
Unit Letter B : 660		line and 1980		tline
Section 26 Township 17S Range 33E NMPM County Lea				
	1. Elevation (Show whether DR, 4148' GL	RKB, RT, GR. etc.,		
12. Check App	propriate Box to Indicate Na	ature of Notice,	Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORL				IG CASING 🗌
TEMPORARILY ABANDON				Ш
	MULTIPLE COMPL	CASING/CEMEN	I JOB 📙	
DOWNHOLE COMMINGLE				
OTHER:		OTHER: 5 year M	IIT	\mathbf{X}
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date				
of starting any proposed work) proposed completion or recom	SEE RULE 19.15,7.14 NMAC	. For Multiple Cor	npletions: Attach wellbore d	iagram of
ConocoPhillips Company performed	•	/15 to 585#/35 min	s - test annd	
Attached is a chart.	& charted the 5 yr Will on 5/11/		s - test good.	
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Spud Date:	Rig Release Da	te·	,	
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I hereby certify that the information about	eve is true and complete to the be	st of my knowledg	e and belief.	
) The same of the			
SIGNATURE TITLE Staff Regulatory Technician DATE 03/23/2015				
Type or print name Rhonda Rogers E-mail address: rogerrs@conocophillips.com PHONE: (432)688-9174				
For State Use Only				
APPROVED BY:	namak TITLE S	tuff Mano	DATE 3/	31/2015
Conditions of Approval (if any):				
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			APR 0 2	2015'

