| Submit 1 Copy To Appropriate District Office | | | Form C-103 |
|---|---|--------------------------------------|--|
| District I (575) 202 (1(1) | Energy, Minerals and Natural Resources | | Revised July 18, 2013 WELL API NO. |
| District I – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283 | Energy, Minerals and Natural Resources CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505 | | 30-025-25852 |
| 811 S. First St., Artesia, NM 882 | OSCONSERVATION DIVISION | | 5. Indicate Type of Lease |
| 1000 Rio Brazos Rd., Azte 178 | 0 Rio Brazos Rd., Azte 378 874 6 | | STATE FEE |
| 1625 N. French Dr., Hobbs, NM 88240 District III - (575) 748-1283 STRICT III - (575) 748-1283 STRICT III - (505) 334-6178 District III - (505) 334-6178 1220 South St. Francis Dr. Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS | | 6. State Oil & Gas Lease No. FEDERAL | |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A | | | 7. Lease Name or Unit Agreement Name WARREN UNIT BT WF |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other INJ WELL | | | 8. Well Number 049 |
| 2. Name of Operator ConocoPhillips Company | | | 9. OGRID Number 217817 |
| 3. Address of Operator | | | 10. Pool name or Wildcat |
| P. O. BOX 51810, MIDLAND, TX 79710 4. Well Location | | | WARREN; BLINEBRY-TUBB-0&G |
| Unit LetterJ:_1980feet from the _SOUTH line and _1980feet from the _EAST line | | | |
| Section 26 Township 20S Range 38E NMPM County LEA | | | |
| 11. Elevation (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 | | | |
| TEMPORARILY ABANDON | | | |
| PULL OR ALTER CASING | MULTIPLE COMPL | CASING/CEMEN | NT JOB |
| DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM | · | | |
| OTHER: | | OTHER: 5 yr M | AIT 🖂 |
| 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. | | | |
| CONOCOPHILLIPS CONDUCTED THE 5 YR MIT ON 2/21/19 TO 580#/32 MINS – TEST GOOD. | | | |
| CHART ATTACHED | | | |
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| Spud Date: | Rig Release Da | ite: | |
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| I hereby certify that the information | above is true and complete to the be | est of my knowled | ge and belief. |
| | | · | |
| SIGNATURE THORSE JOSES TITLE REG TECH DATE 3/26/19 | | | |
| Type or print nameRHONDA ROGERS E-mail address: rogerrs@conocophillips.com_ PHONE:432-688-9174 | | | |
| For State Use Only | | | |
| APPROVED BY: Conditions of Approval (if any): | of Toke TITLE Com | pliance () | ffice A DATE & 4-8-19 |

