Submit 3 Copies To Appropriate District Office	Office District I 625 N. French Dr., Hobbs, NM 88240 District II 301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION		Form C-103 May 27, 2004	
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	30-045-10457
1301 W. Grand Ave., Artesia, NM 88210			5. Indicate Type	
District III 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505		STATE	FEE	
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa re	, INIVI 8/303	6. State Oil & Ga	as Lease No.
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 SAN JUAN 32-8 UNIT	
PROPOSALS.) 1. Type of Well: Oil Well Gas Well X Other			8. Well Number 15	
2. Name of Operator CONOCOPHILLIPS CO.			9. OGRID Number 217817	
3. Address of Operator P.O. BOX 2197 WL3 6108 HOUSTON, TX 77252			10. Pool name or Wildcat BLANCO MESAVERDE	
4. Well Location				
	feet from the			m the WEST line
Section 24	Township 311	N Range 8W ether DR, RKB, RT, GR, etc.	NMPM)	CountySAN JUAN
Pit or Below-grade Tank Application	`.			100 - 100 -
Pit type Workover Depth to Groundwater 50-10@ bistance from nearest fresh water well 200-10@ stance from nearest surface water 0-200'				
Pit Liner Thickness: 12 mil	Below-Grade Tank: Vol	ume bbls; Co	onstruction Material	
12. Check	Appropriate Box to In-	dicate Nature of Notice,	Report or Other	Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK	PLUG AND ABANDON	☐ REMEDIAL WOR ☐ COMMENCE DR	-	ALTERING CASING BANDA
TEMPORARILY ABANDON UPULL OR ALTER CASING	CHANGE PLANS MULTIPLE COMPL	☐ COMMENCE DR		P AND A
OTHER:		OTHER:		
13. Describe proposed or comp				
or recompletion.	to construct a workewer nit	for the above well. Dit cons	truction will be now	OCD quidolinos Wo
ConocoPhillips requests approval tanticipate closure to also be per O		for the above well. Pit cons	iruction will be per	OCD guidelines. We
		control T- of Nove	~~	
15678978				
Fig. 1 Marine Company of the Company				
		~ 3.75 m		
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I horoby contify the A information	ahaya ia tura and assumbat	a to the best of meritimends de	and halise year	
I hereby certify that the information grade tank has been/will be constructed or	r closed according to NMOCD	e to the best of my knowledg guidelines 🔯, a general permit 🗆	or an (attached) altern	er certify that any pit or below- native OCD-approved plan .
SIGNATURE LO LOCA	l Mulely	TITLE REGULATORY ANA	ALYST	DATE 06/06/2005
Type or print name DEBORAH M. For State Use Only	ARBERRY	E-mail address: deborah.mar	berry@conocophi t i	pleplom e No. (832)486-2326
APPROVED BY:	/W.	DEPITY ON P CAS 101	SPECTOR, DIST. BE	PARAL
ALTRUVEDDI. ///		ritle of the substitution	DIELLIN DIST DO	THE STATE OF STATE