

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
June 16, 2008

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

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 PROPOSALS.)		WELL API NO. 30-045-35381
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator CONOCOPHILLIPS COMPANY		6. State Oil & Gas Lease No. B-11479-60
3. Address of Operator P.O. BOX 4289, FARMINGTON NM 87499		7. Lease Name or Unit Agreement Name STATE GAS COM A
4. Well Location Unit Letter J : 1750' feet from the FSL line and 2205' feet from the FEL line Section 36 Township 031N Range 012W NMPM SAN JUAN County NM		8. Well Number 1P
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 5892' GR		9. OGRID Number 217817
		10. Pool name or Wildcat BASIN DAKOTA / BLANCO MESAVERDE

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: FIRST-DELIVERY 03/15/13 <input checked="" type="checkbox"/>
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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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

This well is a new drill and was first-delivered on **03/15/13** and produced natural gas and entrained hydrocarbons of **16,014 MCF**. THIS WELL WAS DELIVERED THROUGH GAS RECOVERY COMPLETION. STARTED SELLING ON THE MV ON 03/15/13. MV & DK FLOWING TOGETHER ON 03/18/13. FINISHED THE GAS RECOVERY COMPLETION 03/20/13.

TP: N/A CP: N/A Initial MCF: 16,014

Meter No.: 36128

Gas Co.: WFS

RCVD MAR 26 '13
OIL CONS. DIV.
DIST. 3

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Arleen White TITLE Staff Regulatory Tech DATE 3/25/13

Type or print name Arleen White E-mail address: arleen.r.white@ConocoPhillips.com PHONE: 505-326-9517

For State Use Only

APPROVED BY: ACCEPTED FOR RECORD TITLE _____ DATE MAR 26 2013

Conditions of Approval (if any):

ca