Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103 May 27, 2004
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resource	WELL API NO. 30-045-21643
District II 1301 W. Grand Ave., Artesia, NM 88210 District III	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr. Santa Fe, NM 87505	STATE FEE 6. State Oil & Gas Lease No.
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	Santa 1 6, 14141 67 303	6. State Oil & Gas Lease No.
(DO NOT USE THIS FORM FOR PROPO	ICES AND REPORTS ON WELLS SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A CATION FOR PERMIT" (FORM C-101) FOR SUCH	
1. Type of Well: Oil Well	Gas Well X Other	8. Well Number 2A
2. Name of Operator CONOCOPHILLIPS CO.		9. OGRID Number 217817
3. Address of Operator P.O. BOX HOUSTO	C 2197 WL3 6108 DN, TX 77252	10. Pool name or Wildcat  BASIN FRUITLAND COAL/BLANCO MESA
4. Well Location	,	BASIN PROTIEAND COAL/BEANCO MES
Unit Letter F: 1650 feet from the NORTH line and 1650 feet from the WEST line		
Section 30	Township 32N Range 10W	NMPM CountySAN JUAN
Pit or Below-grade Tank Application □ or Closure □		
	rater_50-10 <b>6</b> 0istance from nearest fresh water well >100	0 Distance from nearest surface water 200-1000
Pit Liner Thickness: 12 mil Below-Grade Tank; Volume bbls; Construction Material		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING		
TEMPORARILY ABANDON		E DRILLING OPNS. P AND A
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CE	MENT JOB
OTHER:pit	X OTHER:	
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.		
ConocoPhillips requests after the fact approval to construct a pit for this well per OCD guidelines.		
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I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines X, a general permit or an (attached) alternative OCD-approved plan.		
SIGNATURE Alboral	Marley TITLE REGULATORY	ANALYST DATE 12/08/2005
Type or print name DEBORAH MARBERRY  For State Use Only  E-mail address: deborah.marberry@conocophiliplephome No. (832)486-2326		
DEC 1 & 2005		
APPROVED BY: Conditions of Approval (if any):	TITLE	DATE DEC 1 4 2003
<i>V</i>		