Submit 3 Copies 10 Appropriate District Office	State of New Mexico	Form C-103
District I	Energy, Minerals and Natural Resources	May 27, 2004 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II	0.00	WELL API NO. 30-039-24768
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE X FEE
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
87505	/	
(DO NOT USE THIS FORM FOR PROPOS	CES AND REPORTS ON WELLS ALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A ATION FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name or Unit Agreement Name SAN JUAN 30-5 UNIT
	Gas Well 🗓 Other	8. Well Number 219
2. Name of Operator ConocoPhillips Company		9. OGRID Number 217817
3. Address of Operator 5525 Highway 64		10. Pool name or Wildcat
Farmington, NM 87401		BASIN FRUITLAND COAL
4. Well Location		BASIN TROTTEMAD COAL
Unit Letter L :	1586 feet from the FSL line and	feet from the FWL line
Section 16	Township 30N Range 5W	NMPM County
Pit or Below-grade Tank Application ☐ or	11. Elevation (Show whether DR, RKB, RT, GR,	etc.)
	· · ·	Pitters
Pit type Depth to Groundwa Pit Liner Thickness: mil		Distance from nearest surface water Construction Material
12. Check A	ppropriate Box to Indicate Nature of Noti	ce, Report or Other Data
NOTICE OF IN	TENTION TO: S	UBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING		
TEMPORARILY ABANDON L	<u> </u>	DRILLING OPNS. P AND A
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEM	JENI JOB
OTHER:	OTHER:	<u>X</u>
		s, and give pertinent dates, including estimated date : Attach wellbore diagram of proposed completion
or recompletion.		respectively.
A reading from this Pressure Observation	vation Well was taken on 12/14/2005 at a depth of	3062' and the recorded pressure was 187 psi.
	•	33456
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		JAN 2000
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	No.	
	Y	2 (2) 2 02 61 91 July 23.
		Caucauta -
The discount of the second		
grade tank has been/will be constructed or	above is true and complete to the best of my know. closed according to NMOCD guidelines , a general permi	ledge and belief. I further certify that any pit or belowit □ or an (attached) alternative OCD-approved plan □.
SIGNATURE Juant Fax	TITLE Regulatory Analys	DATE 12/15/2005
Type or print name Juanita Farrell For State Use Only		
	E-mail address:	Telephone No. (505)599-3419
APPROVED BY: / J. / J.		Telephone No. (505)599-3419 MSPECTOR, DIST. DATE AN 0 5 2006