Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources	WELL API NO.
District II	OIL CONSERVATION DIVISION	30-045-32897
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr.	5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u>	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		,
(DO NOT USE THIS FORM FOR PROPOS	CES AND REPORTS ON WELLS SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A CATION FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name or Unit Agreement Name STATE COM AL
	Gas Well X Other	8. Well Number 36M
2. Name of Operator CONOCOPHILLIPS CO.		9. OGRID Number 217817
3. Address of Operator P.O. BOX 2197 WL3 6108		10. Pool name or Wildcat
HOUSTO	N, TX 77252	BLANCO MESAVERDE / BASIN DAKOTA
4. Well Location Unit Letter A: 665 feet from the NORTH line and 670 feet from the EAST line		
Unit Letter A : 665 feet from the NORTH line and 670 feet from the EAST line Section 32 Township 31N Range 8W NMPM CountySAN JUAN		
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
	6483 GL	
Pit or Below-grade Tank Application or Closure Pit type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water		
Pit typeDepth to GroundwaterDistance from nearest fresh water wellDistance from nearest surface water Pit Liner Thickness: 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: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PAND A		
PULL OR ALTER CASING	MULTIPLE COMPL CASING/CEMEN	
OTHER: OTHER:		
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion		
or recompletion. ConocoPhillips requests an extension to the APD on this well for an additional year.		
Conocornings requests an extension to the AFD on this wen for an additional year.		
FEB 2006		
S OLCONS. DN. 23		
		DIST. 9
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extand to 2/24/07		
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 _, a general permit _ or an (attached) alternative OCD-approved plan		
SIGNATURE K MALYST DATE 02/13/2006		
Type or print name DEBORAH MARBERRY For State Use Only E-mail address: deborah.marberry@conocophiliplephome No. (832),486-2326		
OSPUTY ON A GAS INSPECTOR OUST AL		
Conditions of Approval (if any):		