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Submit 3 Copies To Appropriate District State of New Mexico Form C-103 Office March 4, 2004 Energy, Minerals and Natural Resources District I WELL API NO. 1625 N. French Dr., Hobbs, NM 88240 DIST. 30-039-29798 District II **OIL CONSERVATION DIVISION** 1301 W. Grand Ave., Artesia, NM 88210 5. Indicate Type of Lease District III 1220 South St. Francis Dr. STATE \boxtimes FEE 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 6. State Oil & Gas Lease No. District IV 1220 S. St. Francis Dr., Santa Fe, NM E-347-47 87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name (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 San Juan 31-6 Unit PROPOSALS.) 8. Well Number 1. Type of Well: #37F Oil Well Gas Well X Other 2. Name of Operator 9. OGRID Number ConocoPhillips Company 217817 3. Address of Operator 10. Pool name or Wildcat P.O. Box 4289, Farmington, NM 87499-4289 Basin Dakota/Blanco MesaVerde 4. Well Location line and 1400 feet from the East_line 2600 feet from the South 36 Township 31N Range R6W NMPM Rio Arriba Section County 11. Elevation (Show whether DR. RKB, RT. GR. etc.) 6553' GL 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** П COMMENCE DRILLING OPNS.□ PLUG AND **ABANDONMENT PULL OR ALTER CASING** MULTIPLE **CASING TEST AND** X COMPLETION **CEMENT JOB OTHER Completion Detail** 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. 11/17/06 RU to Schlumberger Wireline. Start into well w/3.75" gauge ring, tagged @ 8086'. PBTD @ 8101'. Ran BR/CC/CBL log From 8093' (GR log tag) to 2450'. TOC @ 2700'. Continued w/GR/CCL log to surface. NU WH. RD. Pressure test 4 ½" casing to 4100 #/15 min. Test OK. 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 belowgrade tank has been/will be constructed or closed according to NMOCD guidelines _, a general permit _ or an (attached) alternative OCD-approved plan _. nacy V. Momor **SIGNATURE** TITLE Regulatory Technician DATE 1/30/07 Tracey N. Monroe E-mail address: Tracey. N. Monroe@conocophillips.com Telephone No. 505-326-9752

TITLE

Type or print name

(This space for State use)

APPPROVED BY # . .

Conditions of approval, if any:

REPUTY OR & GAS INSPECTOR, DIST. 43

DATEEB 0 5 2007