

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

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

Form C-103

March 4, 2004

WELL API NO.

30-045-32884

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

E-5382

7. Lease Name or Unit Agreement Name

State Com AM

8. Well Number

#37M

9. OGRID Number

217817

10. Pool name or Wildcat

Basin DK/Blanco MV

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.)

1. Type of Well:

Oil Well ☐ Gas Well ☒ Other ☐

2. Name of Operator

ConocoPhillips Company

3. Address of Operator

P.O. Box 4289, Farmington, NM 87499-4289

4. Well Location

Unit Letter L : 2000 feet from the South line and 660 feet from the West line

Section

2

Township

30N

Range

8W NMPM

San Juan

County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐ CHANGE PLANS ☐

PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER ☒ Extend APD expiration date

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

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.

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 ☐.

Wish to extend the APD expiration date on this well.

SIGNATURE

*Rhonda Rogers*

TITLE Regulatory Technician

DATE 2/7/07

Type or print name

Rhonda Rogers

E-mail address: rrogers@br-inc.com

Telephone No. 505-599-4018

(This space for State use)

APPROVED BY

*[Signature]*

TITLE

DEPUTY OIL & GAS INSPECTOR, DIST. 87

DATE

FEB 08 2007

Conditions of approval, if any:

*B* RCVD FEB 08 2007  
OIL CONS. DIV.  
DIST. 3