Submit 3 Copies 10 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	OH CONCEDIVATION DIVISION	3003929430
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.	STATE FEEX
District IV	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		FEE
	ICES AND REPORTS ON WELLS SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name SAN JUAN 29-6 UNIT
DIFFERENT RESERVOIR. USE "APPLIP PROPOSALS.)	CATION FOR PERMIT" (FORM C-101) FOR SUCH	8. Well Number: 1B
1. Type of Well: Oil Well	Gas Well X Other	
2. Name of Operator		9. OGRID Number
CONOCOPHILLIPS OIL &	GAS COMPANY LP	217817
3. Address of Operator P.O. BOX 4289, FARMINGT	ON NM 87499	10. Pool name or Wildcat MV / (BLANCO MESAVERDE)
4. Well Location		
	from the FNL line and 2310' feet from the FEL line	
Section 03 Township 029N Range 006W State NM County RIO ARRIBA		
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
	6384 - GL	
Pit or Below-grade Tank Application []	r Closure 🗌	
Pit type Depth to Groundwater Distance from nearest fresh water well Distance 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 WC	
TEMPORARILY ABANDON	· · · · · · · · · · · · · · · · · · ·	RILLING OPNS. P AND A
PULL OR ALTER CASING	MULTIPLE COMPL	NT JOB
OTHER:	OTHER: FIRS	T DELIVERY 07/30/07 X□
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.		RCVD OCT 30 '07
		OIL CONS. DIV.
		oil com. Div. Dict. 3
		r.d
This well was first delivered on <u>07/30/07</u> and produced natural gas and entrained hydrocarbons of <u>745</u> MCF.		
I hereby certify that the information	above is true and complete to the best of my knowled	lge 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 [].		
MADIAD/ 1	aramin man	V (T) T (10/00/07
SIGNATURE MUNICIPALITY TITLE REGULATORY TECH. DATE 10/28/07		
Type or print name: Marie E. Jaram		
Telephone No. (505) 326-9865	me L-man address. mjaranimo@mane.e.j.	mannio@conocor mmps.com
For State Use Only		
APPROVED BY:	TITLE	DATE
Conditions of Approval (if any):		\mathcal{C}