

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

Form C-103  
June 16, 2008

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. <b>3004534664</b>
5. Indicate Type of Lease - <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. <b>FEE</b>
7. Lease Name or Unit Agreement Name <b>HEATON COM A</b>
8. Well Number <b>100</b>
9. OGRID Number <b>217817</b>
10. Pool name or Wildcat <b>BASIN FRUITLAND COAL</b>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>5957' GR</b>

**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**

4. Well Location  
Unit Letter **M** : **877'** feet from the **FSL** line and **928'** feet from the **FWL** line  
Section **30** Township **031N** Range **011W** NMPM **SAN JUAN** County

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <b>FIRST-DELIVERY</b>	<b>02/09/09</b> <input checked="" type="checkbox"/>

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.

This well was first-delivered on **02/09/09** and produced natural gas and entrained hydrocarbons of **590 MCF**.

TP: 521 CP: 552 Initial MCF: 189

Meter No.: 88662

Gas Co.: EFS

RCVD FEB 13 '09

OIL CONS. DIV.

DIST. 3

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Marie E. Jaramillo TITLE Regulatory Technician DATE 2/9/09  
Type or print name Marie E. Jaramillo E-mail address: marie.e.jaramillo@ConocoPhillips.com PHONE: 505-326-9834  
**For State Use Only**

APPROVED BY: Accepted for Record TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
Conditions of Approval (if any): 2/18/09 KV