| Submit 3 Copies To Appropriate District Office | State of New Mexico | | | | Form C-103 | |
|---|---|--|---|---|--|--|
| District 1 | Energy, Minerals and Natural Resources | | | | Jun 19, 2008 | |
| 1625 N, French Dr , Hobbs, NM 88240 | | | | WELL API NO | | |
| <u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210 | OIL CONSERVATION DIVISION | | | | 30-039-30497 | |
| District III | 1220 South St. Francis Dr. | | | 5. Indicate Ty STATE | pe of Lease FEE | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 District IV | Santa Fe, NM 87505 | | | 6. State Oil & | | |
| 1220 S St. Francis Dr., Santa Fe, NM | 2 | , | | o. State on & | Gas Lease No. | |
| 87505 | | | Amended | | | |
| SUNDRY NOTIC | TES AND REPORTS (| ON WELLS | 7 Hinchaea | 7 Lease Name | e or Unit Agreement Name | |
| 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 | | | | | San Juan 29-6 Unit | |
| PROPOSALS.) 1. Type of Well: Oil Well ☐ Gas Well ☒ Other | | | | 8. Well Numb | 8. Well Number 60M | |
| 2. Name of Operator | | | | 9. OGRID Nu | 9. OGRID Number | |
| ConocoPhillips Company | | | | 10 Pool name | 217817 10. Pool name or Wildcat | |
| 3. Address of Operator P.O. Box 4289, Farmington, NM 87499-4289 | | | | | Blanco MV/Basin DK | |
| | /499-4209 | | | Diai | ico W V/Basiii BK | |
| 4. Well Location | | | | | | |
| Unit Letter F: 2170 | feet from the | North | line and1 | 920'feet fron | | |
| Section 18 | Township 291 | | ange 6W | | io ArribaCounty | |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) | | | | | | |
| | | 6316' | | 7 | | |
| 12. Check A | ppropriate Box to l | Indicate N | ature of Notic | e, Report or Oth | er Data | |
| NOTICE OF IN | TENTION TO | | l su | IBSEQUENT F | REPORT OF | |
| PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WOR | | | | | | |
| | | | | RILLING OPNS. | | |
| PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB | | | | | | |
| OTHER: | | П | OTHER: 🛛 (| Casing Report | | |
| 13. Describe proposed or compl | eted operations. (Clear | rly state all p | pertinent details, | and give pertinent of | dates, including estimated date | |
| of starting any proposed wor or recompletion. | rk). SEE RULE 1103. | For Multip | le Completions: | Attach wellbore die | agram of proposed completion | |
| 01/31/2009 MIRU AWS 730, PT csg hole. RIH w/ 116 jnts of 7" 23# J-55 10bbl GM. Pumped 20sx(73cf-13bbl 113bbl) Lead, 75% Type X1/ 25% C .25pps Cello Flake, 5pps Gilsonite, 2 surface. 2 nd stage Preflushed w/ 10bb Flake, 3% SMS, 20% D46. 370sx(78 Dropped Plug & Displaced w/ 105bb | csg set @ 4814' w/ Sta) Scavenger, 75% Type lass G w/ .25pps Cello % Bent, .15% Fricredu I FW, 10bbl GM. Pumj 8cf-140bbl) Lead, 75% | age tool set (e X1/25% C) Flake, 3% S acer. Droppe ped 20sx(73 b Type X1/2 | © 2625'. RU CM Class G w/ .25pps MS, 20% D46. I d plug & displac cf-13bbl) Scaver | MT 02/13/09.1 st Sta Cello Flake, 3% S (30sx(135cf-29bbl)) ed w/ 190bbl H2O, nger, 75% Type X1 | ge, Preflushed w/ 10bbl FW, MS, 20% D46. 300sx(636cf- Tail, 50/50 POZ/MNT G w/ open DV tool, circ 45bbl to / 25% Class G w/ .25pps Cello | |
| 2/15/09 PT csg 1500#/30min, OK. M jnts of 4.5" 11.6# J-55/L80csg set @'POZ/ MNT G w/ .25pps Cello Flake, Kolite, 3.5% Bent Dropped plug and | 7937'. RU CMT 2/18/0 , 5pps Kolite, 3.5% Ber | 09, Pumped nt. Tail 320s | Preflush 10bbl M x(461cf-82bbl) 5 | IF, 2bbl H2O. Scav 50/50 POZ/ MNT C | renger 10sx(34cf-6bbl) 50/50 G w/ .25pps Cello Flake, 5pps RCVD MAR 11'09 | |
| PT will be conducted by completion | rig; results & TOC will | l appear on | next report. | | GIL CONS. DIV. | |
| Spud Date: | | Pia Pel | eased Date: 2 | 119700 | DIST. 3 | |
| Spud Date. | | Rig Rei | eased Date. | 2/18/09 | | |
| I hereby certify that the information a grade tank has been/will be constructed or | above is true and comp | lete to the be | est of my knowle], a general permit | edge and belief. I fu ⊠ or an (attached) al | rther certify that any pit or below- ternative OCD-approved plan □. | |
| SIGNATURE | | _TITLE | Regulator | <u>Technician</u> DA | TE3/9/09 | |
| Type or print name Kelly Jeffery For State Use Ønly APPROVED BY: Conditions of Approval (if any): | E-mail address: Kell | | eputy Oil & | om PHON Gas Inspectorict #3 | NE: 505-599-4025 DATE MAR 1 6 2009 | |
| Conditions of Approval (If ally): | | | | | | |