

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

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.)		WELL API NO. 3003929598
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator CONOCOPHILLIPS COMPANY		6. State Oil & Gas Lease No. E-347-40
3. Address of Operator P.O. BOX 4289, FARMINGTON NM 87499		7. Lease Name or Unit Agreement Name SAN JUAN 31-6 UNIT
4. Well Location Unit Letter J : 1480 feet from the FSL line and 2125 feet from the FEL line Section 02 Township 030N Range 006W NMPM County RIO ARRIBA		8. Well Number 48F
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6379' GR		9. OGRID Number 217817
		10. Pool name or Wildcat BLANCO MESAVERDE

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 COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: **RE-DELIVERY 02/28/11** ☒

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 had rig work to plug back the Dakota due to excessive water production and is now a Mesaverde standalone. Returned to production on **02/28/11** and produced an initial MCF of **827**.

TP: 438 CP: 423 Initial MCF: 827

Meter No.: 83893

Gas Co.: WFS

PROJECT TYPE: REDELIVERY



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

SIGNATURE Tamra Sessions TITLE Staff Regulatory Tech DATE 03/24/11

Type or print name Tamra Sessions E-mail address: tamra.d.sessions@ConocoPhillips.com PHONE: 505-326-9834
For State Use Only

APPROVED BY: Accepted for Record TITLE _____ DATE _____
Conditions of Approval (if any):

[Handwritten mark]