Submit 3 Copies To Appropriate District Office	State of New Mo	<i>/</i>		Form C-103
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natu	ural Resources	WELL API NO. 30-045-0	March 4, 2004
District II  1301 W. Grand Ave., Artesia, NM 88210  District III			5. Indicate Type of Lease	
District III 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505			STATE X FEE	
1220 S. St. Francis Dr., Santa Fe, NM 87505	ŕ			
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			7. Lease Name or Unit Agreement Name State Com X	
PROPOSALS.)  1. Type of Well:  Oil Well  Gas Well  Other			8. Well Number 20	
2. Name of Operator			9. OGRID Number 217817	
ConocoPhillips Co.  3. Address of Operator P.O. Box 2197, WL3-6054			10. Pool name or Wildcat	
Houston, Tx  4. Well Location	. 77252 (O		Aztec Pictured Cliff/Basin F	ruitland Coal
Unit Letter J : 1450 feet from the South line and 1450 feet from the East line				
Section 36	Township 29N Rail 1. Elevation (Show whether DR		NMPM County Sa	n Juan
5761 GL  Pit or Below-grade Tank Application (For pit or below-grade tank closures, a form C-144 must be attached)				
Pit Location: ULSectTwpRngPit typeDepth to GroundwaterDistance from nearest fresh water well				
Distance from nearest surface water	Below-grade Tank Location UL_	SectTwp_	Rng;	
feet from theline and	feet from theline			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF INTENTION TO: SUB			EQUENT REPORT OF	
PERFORM REMEDIAL WORK [] F	PLUG AND ABANDON	REMEDIAL WORK	∐ ALTERING	CASING
TEMPORARILY ABANDON   (	CHANGE PLANS	COMMENCE DRIL	LING OPNS. PLUG AND ABANDON	
	MULTIPLE  COMPLETION	CASING TEST AND CEMENT JOB	D 🗆	
OTHER:		OTHER: Production		<u>X</u>
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.				
Date of First Sales 6/2/2004				
Casing Pressure 210 Tubing Pressure 210				
Meter No. 71114 Transporter El Paso Field Service				
I hereby certify that the information about	yve is true and complete to the h	est of my knowledge	and halief I further continue that	any nit ay balay
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.				
SIGNATURE Chin Dur	Contra TITLE AS	s Agent for ConocoPh	dillips DATE O	06/17/2004
Type or print name Christina Gustartis	E-mail ac	ldress: christina.gusta	rtis@conocophi <b>llipephon</b> e No	.(832)486-2463
(This space for state use)	51	STORETY ON A PARTY	11	141 7 0
APPPROVED BY Conditions of approval, if any:	TITLE	recuir (#1 & CAS HE	SPECTOR, SIST. @ DATE	11 1 8 500°
CONCURSOR OF ADDITOVAL 11 ADV.				