

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

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

Form C-103

May 27, 2004

|   |                               |
|---|-------------------------------|
| WELL API NO.  | 30-045-29781                  |
| 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |                               |
| 6. State Oil & Gas Lease No.  | 003251                        |
| 7. Lease Name or Unit Agreement Name<br>State   |                               |
| 8. Well Number  | 4E                            |
| 9. OGRID Number   | 217817                        |
| 10. Pool name or Wildcat  | Blanco Mesaverde/Basin Dakota |

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
5924' GL

Pit or Below-grade Tank Application ☐ or 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:

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: ☐

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.

Pumping Unit repairs were done and worn tubing was replaced with new tubing. Tubing set @ 7016' KB. Daily Summary attached.



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 Christina Gustartis

TITLE As Agent for ConocoPhillips Co

DATE 09/16/2004

Type or print name Christina Gustartis

E-mail address: christina.gustartis@conocophillips.com Telephone No. (832)486-2463

For State Use Only

DEPUTY OIL & GAS INSPECTOR, DIST. 4

APPROVED BY Chris Gustartis

TITLE

SEP 20 2004  
DATE

Conditions of Approval (if any):

## Pump Repair

|                              |  |                                  |  |   |  |                         |  |
|------------------------------|--|----------------------------------|--|---|--|-------------------------|--|
| API/UWI<br>300452978100      |  | County<br>RIO ARRIBA             |  | State/Province<br>NEW MEXICO              |  | Operator                |  |
| KB Elevation (ft)<br>5939.00 |  | Ground Elevation (ft)<br>5926.00 |  | Plug Back Total Depth (ft)(KB)<br>7,043.0 |  | Spud Date<br>02/16/2000 |  |
| Rig Release Date             |  |                                  |  |   |  |                         |  |

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