Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
<u>District I</u> • Energ 1625 N. French Dr., Hobbs, NM 88240	y, Minerals and Natural Resources	WELL API NO.
District II	CONSERVATION DIVISION	30-039-27032
District III	1220 South St. Francis Dr.	5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		
SUNDRY NOTICES AND I	REPORTS ON WELLS	7. Lease Name or Unit Agreement Name SAN JUAN 28-7 UNIT
(DO NOT USE THIS FORM FOR PROPOSALS TO DRIID DIFFERENT RESERVOIR. USE "APPLICATION FOR	LL OR TO DEEPEN OR PLUG BACK TO A PERMIT" (FORM C-101) FOR SUCT	SAN JUAN 28-7 UNIT
PROPOSALS.)	2000	8. Well Number 191F
1. Type of Well: Oil Well Gas Well 2. Name of Operator	X Other Co. Co.	Well Number 191F OGRID Number
CONOCOPHILLIPS CO		217817
3. Address of Operator P.O. BOX 2197 WL3 HOUSTON, TX 772	6108	 Pool name or Wildcat BLANCO MESAVERDE/BASIN DAKOT
4. Well Location		22. II. CO MESTIVE IEEE DI IOITI DI IIIO I
Unit Letter I : 1715 feet from the SOUTH line and 670 feet from the EAST line		
	Township 28N Range 7W	NMPM CountyRIO ARRIBA
11. Elevat	ion (Show whether DR, RKB, RT, GR, etc.)	
Pit or Below-grade Tank Application ☐ or Closure ☐	JL	
Pit type DRILL Depth to Groundwater 50-1066	stance from nearest fresh water well_>1000'_ Dist	ance from nearest surface water 200-1000'
Pit Liner Thickness: 12 mil Below-G	rade Tank: Volumebbls; Co	nstruction Material
12. Check Appropriate	Box to Indicate Nature of Notice,	Report or Other Data
	N TO: SUB: D ABANDON REMEDIAL WOR	SEQUENT REPORT OF: ALTERING CASING
TEMPORARILY ABANDON CHANGE	=	
PULL OR ALTER CASING MULTIPLI		
OTHER:PIT	☑ OTHER:	П
13. Describe proposed or completed operati	ons. (Clearly state all pertinent details, and	I 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.		
ConocoPhillips requests approval to construct a drill pit as per NMOCD guidelines. We anticipate closure of the pit as per the guidelines also.		
		A TO THE STATE OF
		(56/83)
		DEC 2000
		2004 2004
		CECE CONTRACTOR
Thomas a contifue that the information above is to a		11.1.6
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 X, a general permit or an (attached) alternative OCD-approved plan.		
SIGNATURE Comballant	TITLE REGULATORY ANAI	LYSTDATE 12/08/2004
Type or print news DEDOD ALL MADDEDDAY	O	
Type or print name DEBORAH MARBERRY For State Use Only	E-mail address:deborah.marb	erry@conocophiliplephone No. (832)486-2326
1 = 111 = 1		DEC - 9 2004
APPROVED BY:	TITL BEPUTY OR & GAS INSPI	DATE
Conditions of Approval (if any).		