Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
District I. 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources	WELL API NO. May 27, 2004
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	30-039-27716
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	5. Indicate Type of Lease STATE X FEE □
District IV	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505		
(DO NOT USE THIS FORM FOR PROPO	ICES AND REPORTS ON WELLS SALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A CATION FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name or Unit Agreement Name San Juan 29-5 Unit
1. Type of Well: Oil Well	Gas Well X Other	8. Well Number 10B
2. Name of Operator ConocoPhilli	ips Co.	9. OGRID Number 217817
3. Address of Operator P.O. Box		10. Pool name or Wildcat Blanco Mesaverde
4. Well Location		
Unit Letter M: 150 feet from the South line and 500 feet from the West line		
Section 16	Township 29N Range 5W 11. Elevation (Show whether DR, RKB, RT, GR, etc.)	NMPM CountyRio Arriba
6647 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; Con	nstruction Material
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON   REMEDIAL WORK	☐ ALTERING CASING ☐
TEMPORARILY ABANDON DULL OR ALTER CASING	CHANGE PLANS	<del>-</del>
	_	_
OTHER:  13. Describe proposed or comp	OTHER:Production letted operations. (Clearly state all pertinent details, and	n Start Up X 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 Feb. 3, 2005 Casing Pressure 440		
Tubing Pressure 440		_
Meter No. 83786-019 Transporter Williams Field Service	e 2345	672
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	30.51.52	all all being
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 Chair Quitaits TITLE As Agent for ConocoPhillips Co DATE 02/04/2005		
Type or print name Christina Gustar	tis E-mail addgess: christina.gusta	rtis@conocophilliels:phune No. (832)486-2463
For State Use Only	// / //	
APPROVED BY: Conditions of Approval (if any):    APPROVED BY:   SUPERVISOR DISTRICT # 3   FEB - 8 2005		