Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103
District 1 En	ergy, Minerals and Natural Resources	June 16, 2008
1625 N. French Dr , Hobbs, NM 88240		WELL API NO.
District II 1301 W Grand Ave Artesia NM 88210 OIL CONSERVATION DIVISION		30-045-13094
1501 W. Grand Me , Meesta, 1411 00210		5. Indicate Type of Lease
1000 Rio Brazos Rd. Aztec NM 87410		STATE . FEE .
District IV Santa Fe, NM 8/505		6. State Oil & Gas Lease No.
1220 S St. Francis Dr., Santa Fe, NM 87505		FEE
SUNDRY NOTICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		SCOTT
DIFFERENT RESERVOIR USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH		SCOTT .
PROPOSALS.)		0. W. II M 1
1. Type of Well: Oil Well Gas Well Other		8. Well Number 1
2. Name of Operator		9. OGRID Number 217817
CONOCOPHILLIPS COMPANY		
3. Address of Operator		10. Pool name or Wildcat
P.O. BOX 4289, FARMINGTON NM 87499		BASIN DAKOTA
4. Well Location		
Unit Letter K : 2220' feet from the FSL line and 1450' feet from the FWL line		
Section 02 Township 029N Range 013W NMPM County SAN JUAN		
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
	6259' GR	
12 Check Appropr	iste Roy to Indicate Nature of Notice	Report or Other Data
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
	GE PLANS COMMENCE DRI	
PULL OR ALTER CASING MULTI	PLE COMPL	「JOB □
OTHER:		RE-DELIVERY 10/05/11⊠
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 was shut in more than 90 days due to facility upgrade. Returned to production on 10/05/11 and produced an initial MCF of 918.		
		RCVD JAN 13'12
TP: 399	CF: 918	
		OIL CONS. DIV.
Meter No.: 73470		0157.5
	•	2. 2
Gas Co.: EFS		
PROJECT TYPE: REDELIVERY		
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i nereby certify that the information above is	true and complete to the best of my knowledge	e and belief.
	V ')	_
SIGNATURE MILL MAN MAN	TITLE OF STATE	1 DATE 01/10/10
SIGNATURE MILL Staff Regulatory Tech DATE 01/10/12		
Type or print nameMarie E. Jaramillo E-mail address: marie.e.jaramillo@ConocoPhillips.com PHONE:505-326-9865		
ACCEPTED FOR RECOPTED FOR RECOP		
APPROVED BY:	TITLE	DATE
Conditions of Approval (if any):		