Submit 3 Copies To Appropriate District Office District I	State of New Mexico Energy, Minerals and Natural Resources OIL CONSERVATION DIVISION		Form C-103 May 27, 2004
1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210			WELL API NO. 30-039-23798
District III 1000 Pio Brazos Rd Aztec NM 87410 1220 South St. Francis Dr.		5. Indicate Type of Lease STATE FEE	
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505		, NM 87505	6. State Oil & Gas Lease No.
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 LINDRITH B UNIT
PROPOSALS.) 1. Type of Well: Oil Well Gas Well X Other			8. Well Number 33
2. Name of Operator CONOCOPHILLIPS CO.			9. OGRID Number 217817
3. Address of Operator P.O. BOX 2197 WL3 6108 HOUSTON, TX 77252			10. Pool name or Wildcat LINDRITH GALLUP-DAKOTA WEST
4. Well Location			
Unit Letter I : 1815 feet from the SOUTH line and 560 feet from the EAST line			
Section 21	Township 24N	N Range 3W ether DR, RKB, RT, GR, etc.	NMPM CountyRIO ARRIBA
Pit or Below-grade Tank Application ☒ or Closure ☐			
			stance from nearest surface water 200-1000
Pit Liner Thickness: 12 mil			onstruction Material
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF IN PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING	ITENTION TO: PLUG AND ABANDON CHANGE PLANS MULTIPLE COMPL	REMEDIAL WOR	ILLING OPNS. P AND A
OTHER:pit 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.			
ConocoPhillips proposes to construct a workover pit on the above well. We anticipate closure per NMOCD guidelines.			
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I hereby certify that the information	above is true and complete	to the best of my knowledge	and belief to a
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 L LA LOSSA	h Mahess 1	TITLE REGULATORY ANA	DATE <u>04/06/2005</u>
Type or print name DEBORAH MARBERRY E-mail address:deborah.marberry@conocophiTiple.phome No. (832)486-2326 For State Use Only APR - 8 2005			
APPROVED BY: 1 Feir	y tearly	TITLE BEPUTY OIL & GAS I	DATE
Conditions of Approval (if any):	/		DATE