Office Submit 3 Copies To Appropriate District	State of New Me	exico	Form C-103
District I	Energy, Minerals and Natu	ıral Resources	Jun 19, 2008
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.
District II	OIL CONSERVATION	MOISIVIG	30-039-25110
1301 W. Grand Ave., Artesia, NM 88210 District III			5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Fran		STATE 🛛 FEE 🗌
District IV	Santa Fe, NM 87	7505	6. State Oil & Gas Lease No.
1220 S St Francis Dr, Santa Fe, NM			E-347-41
87505			
	ES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSA DIFFERENT RESERVOIR. USE "APPLICA	ALS TO DRILL OR TO DEEPEN OR PLUTION FOR DEPARTS (FORM C. 101) FO	UG BACK TO A	San Juan 30-5 Unit
PROPOSALS)	TION FOR PERMIT (FORM C-101) FO	JR SUCH	
	as Well 🛛 Other		8. Well Number 237
2. Name of Operator	nas wen 🖂 Other		9. OGRID Number
ConocoPhillips Company			
3. Address of Operator	<del></del>		217817
P.O. Box 4289, Farmington, NM 87499-4289		10. Pool name or Wildcat	
			Basin Fruitland Coal
4. Well Location			
Unit Letter B: 1179	feet from theNorth	line and <b>146</b>	8 feet from the <b>East</b> line
Section 16			NMPM Rio Arriba County
Section 10			
	11. Elevation (Show whether DR,	,	
	6361'		The state of the s
12. Check A <sub>I</sub>	propriate Box to Indicate N	ature of Notice,	Report or Other Data
NOTICE OF INT	ENTION TO:	SUB:	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON 🔲	REMEDIAL WORL	
TEMPORARILY ABANDON	CHANGE PLANS □	COMMENCE DRI	LLING OPNS.□ P AND A □
	MULTIPLE COMPL	CASING/CEMENT	
DOWNHOLE COMMINGLE	MO2111 EE 001111 E	ONONIONOLINIEN	
DOWNHOLE COMMINGLE []			
OTHER: □			THE COOR !
OTHER. []		□ Focation is:	ready for OCD inspection after P&A
UNIT LETTER, SECTION PERMANENTLY STAMP    The location has been leveled as rother production equipment.  Anchors, dead men, tie downs and lifthis is a one-well lease or last rococomocomocomocomocomocomocomocomocomo	ed and leveled. Cathodic protection of the prote	on holes have been plevel has been set in API NUMBER, QUALL INFORMATION.  Indicate the set of the s	properly abandoned. concrete. It show the  ARTER/QUARTER LOCATION OR ION HAS BEEN WELDED OR  Deen cleared of all junk, trash, flow lines and and level. have been remediated in compliance with production equipment and junk have been eved. (Poured onsite concrete bases do not  All fluids have been removed from non-
When all work has been completed, re	turn this form to the appropriate I	District office to scho	edule an inspection.
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(x)	3		-//
SIGNATURE / Allie / A		O	Technician DATE 3/1/12
	SusseTITLE	Staff Regulatory	Technician Bill Stiff
			•
Type or print name Dollie L. Busse			com PHONE: 505-324-6104
Type or print name Dollie L. Busse For State Use Only			•
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For State Use Only	E-mail address: dollie.l.bus	se@conocophillips.	com PHONE: 505-324-6104
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