Submit 3 Copies 10 Appropriate District Office District I State of New Energy, Minerals and		Form C-103 May 27, 2004
1625 N. French Dr., Hobbs, NM 88240	WELL AF	
District II 1301 W. Grand Ave., Artesia, NM 88210 District III 1220 South St.	5 Indicate	e Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Francis Dr. STA	ATE X FEE
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	8. State 0	il & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WE (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN & DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-1)	R PLUGBACK TO A SAN JUA	Name or Unit Agreement Name N 32-7 UNIT
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other	8. Well N	umber 250
2. Name of Operator ConocoPhillips Company	C)9. OGRIE	Number 217817
3. Address of Operator 5525 Highway 64		name or Wildcat
Farmington, NM 87401 4. Well Location	BASIN I	FRUITLAND COAL
Unit Letter N : 1020 feet from the FSI	line and 1633	feet from the FWL line
Section 16 Township 32N	Range 7W NMPM	CountySAN JUAN
11. Elevation (Show whether 6357 GL	DR, RKB, RT, GR, etc.)	
Pit or Below-grade Tank Application □ or Closure □ Pit type □ Depth to Groundwater □ Distance from nearest f	esh water well Distance from nea	rest surface water
Pit Liner Thickness: mil Below-Grade Tank: Volume	bbls; Construction Ma	
12. Check Appropriate Box to Indica		
NOTICE OF INTENTION TO:	•	T REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON	REMEDIAL WORK	☐ ALTERING CASING ☐
TEMPORARILY ABANDON	COMMENCE DRILLING OPN	S. P AND A
PULL OR ALTER CASING	CASING/CEMENT JOB	
OTHER: 13. Describe proposed or completed operations. (Clearly state	OTHER:Spud Report	
of starting any proposed work). SEE RULE 1103. For M or recompletion.	ultiple Completions: Attach wellbor	re diagram of proposed completion
ConocoPhillips spud this well on 04/29/2005 at 0300 HRS.		
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 Junet Farrell TITL	ERegulatory Analyst	DATE 05/02/2005
Type or print name Juanita Farrell E-m	ail address:juanita.r.farrell@conocop	ohillip Edephone No. (505) 599-3419
For State Use Only		MAY -3 2005
APPROVED BY: Charl TITL Conditions of Approval (if any):	SUPERVISOR DISTRICT#3	DATE