Office	m C-103
<u>District</u> Energy, Minerals and Natural Resources	lay 27, 2004
District II OII CONSEDVATION DIVISION 30-045-323	70
District III 1220 South St. Francis Dr.	
District IV  1220 South St. Francis Dr.  STATE FEE  Santa Fe, NM 87505  6 State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM	
87505 SUNDRY NOTICES AND REPORTS ON WELLS 7 Lease Name or Unit Agreeme	ent Name
(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  SAN JUAN 32-8 UNIT	
PROPOSALS.) 1. Type of Well: Oil Well Gas Well X Other  8. Well Number 257A	
2. Name of Operator 9. OGRID Number	
CONCCOTTIBLE CC.	
3. Address of Operator P.O. BOX 2197 WL3 6108 HOUSTON, TX 77252 10. Pool name or Wildcat BASIN FRUITLAND COAL	
4. Well Location	
Unit Letter J: 1840 feet from the SOUTH line and 660 feet from the EAST	line
Section 19 Township 32N Range 8W NMPM CountySAN  11. Elevation (Show whether DR, RKB, RT, GR, etc.)	JUAN
6808	
Pit or Below-grade Tank Application \( \sum \) or Closure \( \sum \)	) i
Pit type Workover Depth to Groundwater > 100' Distance from nearest fresh water well > 1000' Distance from nearest surface water > 1000 Distance from near	<del>)</del>
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:  SUBSEQUENT REPORT OF:	ACINO []
PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CATE TEMPORARILY ABANDON   CHANGE PLANS   COMMENCE DRILLING OPNS.   P AND A	ASING [
PULL OR ALTER CASING  MULTIPLE COMPL  CASING/CEMENT JOB	
OTHER:pit    OTHER:   OTHER:     13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including es	timated date
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed or recompletion.	
ConocoPhillips requests approval to construct a pit as per the NMOCD guidelines. The pit is expected to be closed as per the	e
guidelines also.	
1822 73 76 75 3	
AUG 200 ES	
E List On	
0.8.1.9	
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-appro	pit or below-
2, , , , , , , , , , , , , , , , , , ,	P
SIGNATURE Lebosh Mallest TITLE REGULATORY ANALYST DATE 08/24	_
SIGNATURE TITLE REGULATORY ANALYST DATE 08/24/ Type or print name DEBORAH MARBERRY E-mail address: deborah.marberry@conocophilliplesphome No. (8	2005
TITLE REGULATORY ANALYST  DATE 08/24/  Type or print name DEBORAH MARBERRY  For State Use Only  DEPUTY OR & GAS INSPECTOR, DIST, 433	2005