

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-045-34025	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No. E-3374	
7. Lease Name or Unit Agreement Name STATE COM M	
8. Well Number 10	
9. OGRID Number 217817	
10. Pool name or Wildcat Blanco MV / Basin DK	

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 PROPOSALS.)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator **ConocoPhillips Company**

3. Address of Operator **P.O. Box 4289, Farmington, NM 87499**

4. Well Location
 Unit Letter **L** : **2110** feet from the **SOUTH** line and **855** feet from the **WEST** line
 Section **36** Township **32N** Range **11W** NMPM **San Juan** County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
6329' GR

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: Redelivery <input checked="" type="checkbox"/>	

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

This well was recompleted to the Mesa Verde and commingled with the existing Dakota. Returned to production on 9/9/16.

TP: 209 CP: 181 Initial MCF: 679

Meter No.: 88657 Gas Co.: ENT

Project Type: RECOMPLETE

OIL CONS. DIV DIST. 3

SEP 28 2016

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Kelly G. Roberts TITLE Regulatory Technician DATE 9/27/16

Type or print name Kelly G. Roberts E-mail address: kelly.roberts@cop.com PHONE: (505) 326-9775
 For State Use Only

APPROVED BY: Accepted for Record TITLE Deputy Oil & Gas Inspector, District #3 DATE 9-28-16
 Conditions of Approval (if any): AV

d/b