Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		May 27, 2004 WELL API NO.
District II	OIL CONSERVATION	DIVISION	30-039-24768
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Fran		5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87	1	STATE X FEE
1220 S. St. Francis Dr., Santa Fe, NM			o. State on & Gas Lease No.
87505 SUNDRY NOT	ICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPO	OSALS TO DRILL OR TO DEEPEN OR PLICATION FOR PERMIT" (FORM C-101) FO	JG BACK TO A	SAN JUAN 30-5 UNIT
1. Type of Well: Oil Well Gas Well X Other		8. Well Number 219	
2. Name of Operator ConocoPhillips Company			9. OGRID Number 217817
3. Address of Operator 5525 Highway 64			10. Pool name or Wildcat
Farmington, NM 87401			BASIN FRUITLAND COAL
4. Well Location Unit Letter L	1586 feet from the FSL	line and 130	4 feet from the FWL line
Section 16		ange 5W	NMPM County
3000000	11. Elevation (Show whether DR,		Councy
Pit or Below-grade Tank Application	or Closure		
	vaterDistance from nearest fresh w	vater well Dista	nce from nearest surface water
Pit Liner Thickness: mi			struction Material
12. Check	Appropriate Box to Indicate N	ature of Notice. I	Report or Other Data
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK DALTERING CASING DALTERING DALTERING CASING DALTERING DALTERING DALTERING CASING DALTERING			
TEMPORARILY ABANDON		COMMENCE DRIL	
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	JOB 🗆 🗎
OTHER:		OTHER: Well Test	Th X
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.			
A successful casing integrity test was run, 03/15/2006 (see attached copy of chart). ConocoPhillips requests to keep this well's shut-in status because we are using this wells as a pressure observation well. The sundry stating the recorded pressure was submitted			
12/15/2005.			
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			Cat Callabaration
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I nereby certify that the information grade tank has been/will be constructed o	above is true and complete to the box closed according to NMOCD guidelines [est of my knowledge □, a general permit □ o	and belief. I further certify that any pit or belower an (attached) alternative OCD-approved plan .
SIGNATURE Junt Ja	uell TITLE Re	gulatory Specialist	DATE 04/13/2006
Type or prine name Juanita Farrell For State Use Only	E-mail ac	ldress:	Telephone No. (505)599-341
APPROVED BY: A. VILL Conditions of Approval (if any):	anner TITLE	UTY OR & GAS INS	DATE

