Submit 3 Copies To Appropriate District State of New Mexico Form C-103 Office March 4, 2004 Energy, Minerals and Natural Resources District I WELL API NO. 1625 N. French Dr., Hobbs, NM 88240 30-045-32896 District II OIL CONSERVATION DIVISION 1301 W. Grand Ave., Artesia, NM 88210 5. Indicate Type of Lease District III 1220 South St. Francis Dr. STATE 🛛 FEE 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 6. State Oil & Gas Lease No. District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement 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 STATE COM AL PROPOSALS.) 8. Well Number 1. Type of Well: #36M Gas Well X Other Oil Well 2. Name of Operator 9. OGRID Number ConocoPhillips Company 217817 10. Pool name or Wildcat 3. Address of Operator P.O. Box 4289, Farmington, NM 87499-4289 Blanco MV/Basin DK 4. Well Location 665 feet from the North line and 670 feet from the East line 32 Section Township 31N Range R8W NMPM San Juan County 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6483 GR 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ALTERING CASING [**TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. **PLUG AND ABANDONMENT PULL OR ALTER CASING** П MULTIPLE CASING TEST AND COMPLETION **CEMENT JOB** OTHER П OTHER: PT & Log Detail Ø 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. 6/29/06, RU WL. PBTD@ 7929'. Run CBL from 7906' to 2640', TDT from 7906' to 1950', GR/CCL from 1950' to surface. TOC @ 2890' (787' overlap). 7" shoe @ 3677'. PT casing to 4100#/30min. OK. RD WL. 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 belowgrade tank has been/will be constructed or closed according to NMOCD guidelines _, a general permit _ or an (attached) alternative OCD-approved plan _. SIGNATURE X (I) NAL TITLE Regulatory Assistant DATE 9/21/06 E-mail address: kburns2@br-inc.com Type or print name Kandis Roland Telephone No. 505-326-9743 (This space for State use) DATE SEP 2 5 2006 deputy oil & gas inspector, dist. 🕮 🗀 APPPROVED BY Conditions of approval, if any: