Office State of New Mexico	Form C-103
<u>District I</u> Energy, Minerals and Natural Resources	June 16, 2008
1625 N. French Dr., Hobbs, NM 88240 District II	WELL API NO. 3003929728
1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION	5. Indicate Type of Lease
District III 1220 South St. Francis Dr.	STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	E-289-3
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	SAN JUAN 29-6 UNIT
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	8. Well Number 107F
1. Type of Well: Oil Well Gas Well Other	
2. Name of Operator CONOCOPHILLIPS COMPANY	9. OGRID Number 217817
3. Address of Operator	10. Pool name or Wildcat
P.O. BOX 4289, FARMINGTON NM 87499	BASIN DAKOTA / BLANCO MESAVERDE
4. Well Location	
Unit Letter K: 2180' feet from the FSL line and 2015'	feet from theFWLline
Section 36 Township 029N Range 006W NMPM	RIO ARRIBA County NM
11. Elevation (Show whether DR, RKB, RT, GR, etc.	c.)
6458' GR	
12. Check Appropriate Box to Indicate Nature of Notice	Report or Other Data
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	BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WO	-
· · · · · · · · · · · · · · · · · · ·	RILLING OPNS. P AND A
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEME	NT JOB
OTHER:	FIRST-DELIVERY 07/05/06
13. Describe proposed or completed operations. (Clearly state all pertinent details, a	
of starting any proposed work). SEE RULE 1103. For Multiple Completions: A	
or recompletion.	tuton wendore diagram of proposed completion
This well is a new drill and was first-delivered on <u>07/05/06</u> and produced natural gas and e	entrained hydrocarbons of 603 MCF.
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TP: 907 CP: 757 Initial MCF: 603	
III. you	RCVD APR 7'10
Meter No.: 83943	OIL CONS. DIV.
Gas Co.: WFS	DIST. 3
T1 1	11.1.6
I hereby certify that the information above is true and complete to the best of my knowled	ge and belief.
SIGNATURE Tan Session TITLE Staff Regulatory Tec	ch DATE 04/05/10
biolivitore just regulatory for	D11111
Type or print nameTamra Sessions E-mail address: tamra.d.sessions@Conoc	coPhillips.com PHONE: 505-326-9834
For State Use Only	
APPROVED BY: <u>ACCEPTED for NOROL</u> TITLE Conditions of Approval (if any): ()	DATE
Conditions of Approval (if any): /)	