

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
811 South First, Artesia, NM 87210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised March 25, 1999

OIL CONSERVATION DIVISION

2040 South Pacheco
Santa Fe, NM 87505

WELL API NO.	30-045-27534
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unti Agreement Name	THREE STATES COM LS
8. Well No.	1A
9. Pool name or Wildcat	BLANCO PICTURED CLIFFS/BLANCO MES

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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	
2. Name of Operator	CONOCO, INC.
3. Address of Operator	P.O. BOX 2197 DU 3066 HOUSTON TX 77252
4. Well Location Unit Letter C 1030' feet from the NORTH line and 1550' feet from the WEST line Section 16 Township 29N Range 8W NMPM County SAN JUAN	
10. Elevation (Show whether DR, RKB, RT, GR, etc.)	

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: DHC <input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOBS <input type="checkbox"/> OTHER: <input type="checkbox"/>

12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work). SEE RULE 1103. For Multiple Completions: Attach diagram of proposed completion or recompletion.

In reference to Order #R-11363 Conoco proposes to downhole commingle in the Blanco Pictured Cliffs and Blanco Mesaverde.

Perforations are:

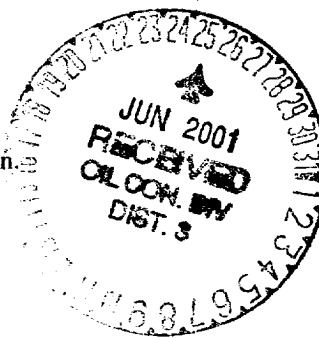
Pictured Cliffs 3131' - 3191' proposed
Blanco Mesaverde 4646'-5618'

Allocation will be by subtraction

Commingling in this well will not reduce the value of the remaining production.

The Public Land Office has been sent notice of our intent.

Interest owners have been notified.



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

SIGNATURE Deborah Marberry TITLE REGULATORY ANALYST DATE 6/14/2001

Type or print name DEBORAH MARBERRY Telephone No. (281)293-1005

(This space for State use)

APPROVED BY Original Signed by STEVEN N. HAYDEN TITLE DEPUTY OIL & GAS INSPECTOR, DIST. 3 DATE JUN 25 2001

Conditions of approval, if any:

K

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State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 15, 2000

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

1 API Number 30-045-27534		2 Pool Code 72319		3 Pool Name BLANCO MESAVERDE		
4 Property Code 016724		5 Property Name THREE STATES COM LS			6 Well Number 1A	
7 OGRID No. 005073		8 Operator Name CONOCO, INC.			9 Elevation	

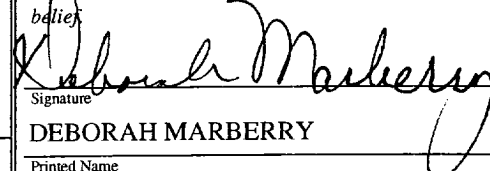
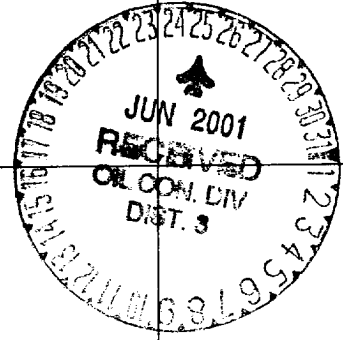
10 Surface Location

UL or lot no. C	Section 19	Township 29N	Range 8W	Lot Idn	Feet from the 1030'	North/South line NORTH	Feet from the 1550'	East/West line WEST	County SAN JUAN
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11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
12 Dedicated Acres		13 Joint or Infill		14 Consolidation Code		15 Order No.			

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A
NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

16				17 OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.  Signature DEBORAH MARBERRY Printed Name REGULATORY ANALYST Title 05/24/2001 Date	
				18 SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief. Date of Survey Signature and Seal of Professional Surveyor: Certificate Number	

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				Signature DEBORAH MARBERRY			
				Printed Name REGULATORY ANALYST			
				Title			
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				Date of Survey			
				Signature and Seal of Professional Surveyor:			
				Certificate Number			