

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

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.)		WELL API NO. 30-025-44219
1. Type of Well: Oil Well ☒ Gas Well ☐ Other ☐		5. Indicate Type of Lease Federal STATE ☐ FEE ☐
2. Name of Operator ConocoPhillips Company		6. State Oil & Gas Lease No. NMLC062749B
3. Address of Operator 903 N ELDRIDGE PARKWAY HOUSTON, TX 77079		7. Lease Name or Unit Agreement Name ZIA HILLS 19 FEDERAL COM
4. Well Location Unit Letter _____ Lot 2 : _____ 2627 _____ feet from the _____ North _____ line and _____ 430 _____ feet from the _____ West _____ line Section 19 Township 26S Range 32E NMPM County LEA		8. Well Number 105H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3176		9. OGRID Number 217817
10. Pool name or Wildcat ZIA HILLS; WOLFCAMP		

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

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐ DOWNHOLE COMMINGLE ☐ CLOSED-LOOP SYSTEM ☐ OTHER: ☐		SUBSEQUENT REPORT OF: REMEDIAL WORK ☐ ALTERING CASING ☐ COMMENCE DRILLING OPNS. ☐ P AND A ☐ CASING/CEMENT JOB ☐ OTHER: WELL COMPLETION ☒	
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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.

11/9/20 PT PROD CSG TO 1500#/30 MINS TEST HELD

11/24/20 – 12/20/20 PERF F/11,645' - 21821'. ACIDIZE W/15% HCL ACID & 25,567,809 TOTAL PROPPANTS

12/30/20 RDMO

Spud Date: 1-18-20

Rig Release Date: 4/29/20

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

SIGNATURE Jeremy Lee TITLE Regulatory Coordinator DATE 1/27/21

Type or print name Jeremy Lee E-mail address: Jeremy.L.Lee@cop.com PHONE: 832-486-2510

For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):

District I

1625 N. French Dr., Hobbs, NM 88240
Phone:(575) 393-6161 Fax:(575) 393-0720

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District III

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District IV

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Phone:(505) 476-3470 Fax:(505) 476-3462

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Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

CONDITIONS

Action 15875

CONDITIONS OF APPROVAL

Operator:	OGRID:	Action Number:	Action Type:
CONOCOPHILLIPS COMPANY P.O.Box 2197 Office SP2-12-W156 Houston, TX77252	217817	15875	C-103T

OCD Reviewer	Condition
plmartinez	None