

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. Multiple Wells - See Description
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator ConocoPhillips Company		6. State Oil & Gas Lease No. B-2656
3. Address of Operator P.O. Box 2197, Houston, TX 77252		7. Lease Name or Unit Agreement Name Hardy 36 State
4. Well Location Multiple Locations - See Description Unit Letter _____ : _____ feet from the _____ line and _____ feet from the _____ line Section _____ Township _____ Range _____ NMPM _____ County _____ Lea _____		8. Well Number Multiple Wells - See Description
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 217817
10. Pool name or Wildcat Multiple - See Description		

12. 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 COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: Turn On Notice- Multiple Wells <input checked="" type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>	
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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.

ConocoPhillips Company respectfully submits this notification of plans to begin turning on the subject wells, which were shut in on 6/1/2020.

Turn on expected to begin 7/1/2020.

Hardy 36 State #001	30-025-32128	K-36-20S-37E	Skaggs; Grayburg
Hardy 36 State #002	30-025-32473	K-36-20S-37E	Hardy Tubb Drinkard
Hardy 36 State #004	30-025-32513	J-36-20S-37E	Hardy Tubb Drinkard
Hardy 36 State #015	30-025-33924	N-36-20S-37E	Cass (Strawn), South
Hardy 36 State #018	30-025-33027	A-36-20S-37E	Hardy Tubb Drinkard

Spud Date:

Rig Release Date:

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

SIGNATURE Carol Appleby TITLE Sr. Regulatory Coordinator DATE 06/26/2020

Type or print name Carol Appleby E-mail address: carol.j.appleby@conocophillips.com PHONE: 832-486-6187

For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):