

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

HOBBS OCD

OIL CONSERVATION DIVISION

JAN 07 2014

1220 South St. Francis Dr.
Santa Fe, NM 87505

| |
|---|
| WELL API NO. 30-025-32697 |
| 5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No. |
| 7. Lease Name or Unit Agreement Name State A-19 |
| 8. Well Number 2 |
| 9. OGRID Number 217817 |
| 10. Pool name or Wildcat Eumont Yates 7 Rvrs Queen Gas |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3645' GL |

| | |
|---|--|
| 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 ConocoPhillips Company | |
| 3. Address of Operator P.O. Box 51810, Midland, TX 79710 | |
| 4. Well Location Unit Letter L : 1760 feet from the South line and 624 feet from the West line Section 19 Township 19-S Range 37-E NMPM Lea County | |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3645' GL | |

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: <input 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 checked="" type="checkbox"/> |
| CASING/CEMENT JOB <input type="checkbox"/> | |
| OTHER: <input type="checkbox"/> | |

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.

12/11/13----Call OCD to notify of move in.

12/26/13----Set CIBP w/ wireline @ 3298', tbg @ 3298' circ hole w/ 10# MLF & cap CIBP w/ 65 sxs cmt @ 3298' CAL TOC @ 2450' Tag @ 2400'.

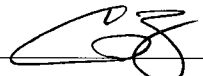
12/27/13----Tbg @ 1450' spot 25 sxs cmt CAL TOC @ 1200' Tag @ 1032'.

12/30/13----Perf @ 60', tbg @ 461' pump 35 sxs cmt to surface out of the 4 1/2 csg & pump 20 sxs cmt from 60' to surface out of the 8 3/4 csg - leave 4 1/2 full of cmt. RDMO.

Spud Date: **5/11/97**


Rig Release Date: **05/21/97**

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

SIGNATURE  TITLE **P&A Tech** DATE **01/02/14**

Type or print name **Greg Bryant** E-mail address: _____ PHONE: **432-563-3355**

For State Use Only

APPROVED BY:  TITLE **Compliance Officer** DATE **01/08/2014**

Conditions of Approval (if any):

JAN 08 2014