

Office

Energy, Minerals and Natural Resources

Revised August 1, 2011

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 87400

District IV - (505) 476-3460

1220 S. St. Francis Dr., Santa Fe, NM

87505

HOBBS OGD

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

APR 02 2014

WELL API NO.

30-025-25245

5. Indicate Type of Lease

STATE ☐ FEE ☐

6. State Oil & Gas Lease No.

Federal

7. Lease Name or Unit Agreement Name

Warren Unit Blinebry Tubb WF

8. Well Number 41

9. OGRID Number

217817

10. Pool name or Wildcat

Warren

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 ☐ Gas Well ☒ Other Injection2. Name of Operator
ConocoPhillips Company3. Address of Operator
P. O. Box 51810
Midland, TX 79710

4. Well Location

Unit Letter N : 660 feet from the South line and 1980 feet from the West line

Section 27 Township 20S Range 38E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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 ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
 COMMENCE DRILLING OPNS. ☐ P AND A ☐
 CASING/CEMENT JOB ☐

OTHER: MIT ☒

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 performed the 5 year MIT on 2/17/14 to 540#/60 mins - test good.
 Chart attached

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

TITLE Staff Regulatory Technician

DATE 03/31/2014

Type or print name Rhonda Rogers

E-mail address: rogerr@conocophillips.com

PHONE: (432)688-9174

For State Use Only

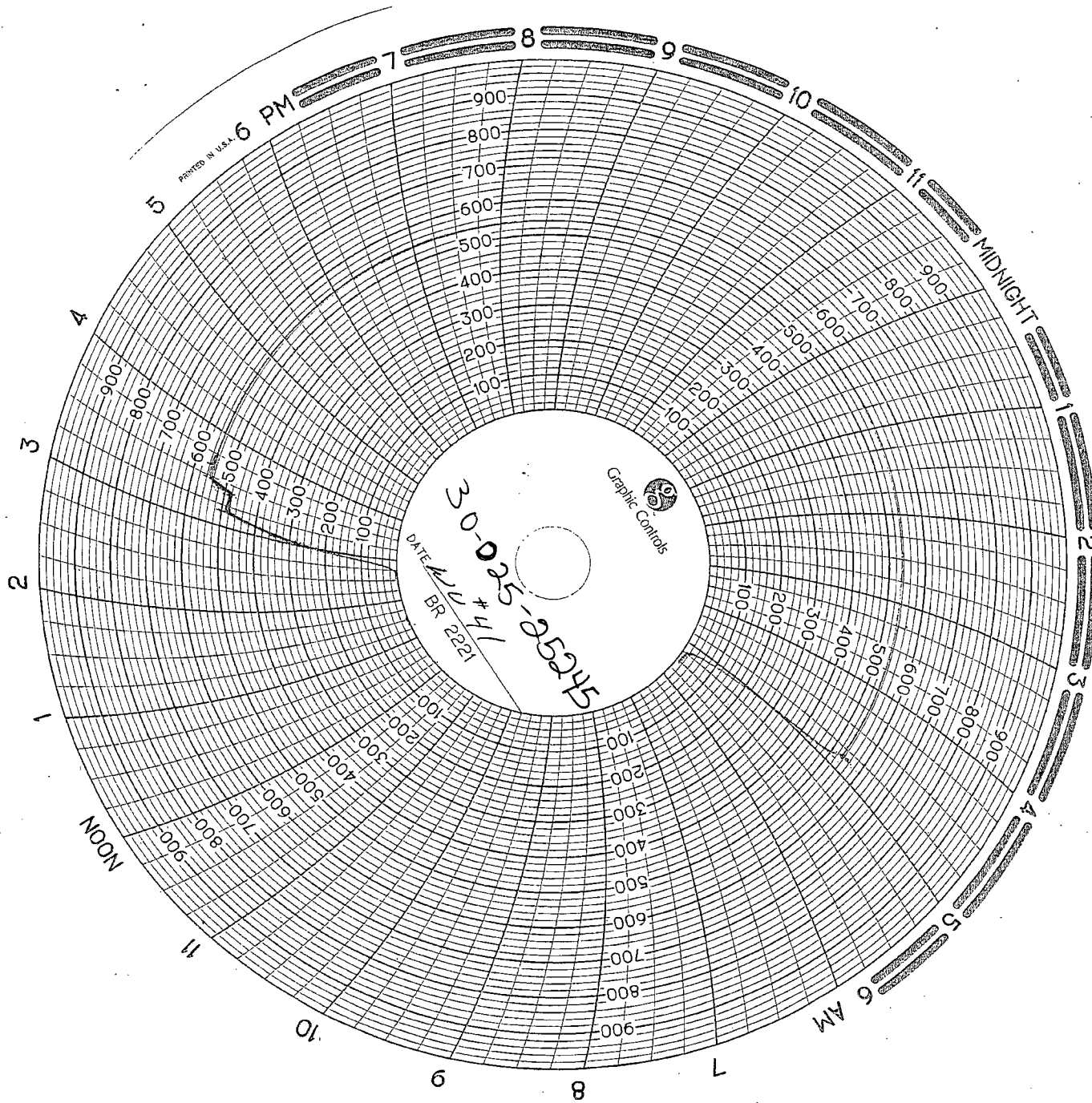
APPROVED BY:

TITLE Staff Manager

DATE 4-3-14

Conditions of Approval (if any):

APR 14 2014



11-17-14
1001

Recorder
 Ser # A808
 1000 PSI
 tested 1-08-14
 End time 11:45 PM
 Start 1:10 PM
 1044 WABAR WHBOIS WABAR
 #502
 471 Phillips Unit
 2-17-14
 C0A0C0
 UABAR WHBOIS WABAR
 K582
 051655 WABAR WHBOIS
 WABAR WHBOIS
 SET 27-720S-K582
 Fred LSE M.A.L.C.-051655
 Jan 17-14
 Cops