Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103
District I - (575) 393-6161	Energy, Minerals and Natural R	esources WELL API N	Revised August 1, 2011
District 1I – (575) 748-1283	625 N. French Dr., Hobbs, NM 88240 istrict 1i = (575) 748-1283		30-025-04757
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178	OIL CONSERVATION DIN 1220 South St. Francis I	5. Indicate 1:	
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	SIAH	
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505	Salita Pe, Nivi 67303	6. State Oil &	z Gas Lease No.
SUNDRY NOTIC	CES AND REPORTS ON WELLS		ne or Unit Agreement Name
	ALS TO DRILL OR TO DEEPEN OR PLUG BA ATION FOR PERMIT" (FORM C-101) FOR SU	СН	
·	Gas Well Other HOBBS OC	8. Well Num	. 03
2. Name of Operator ConocoPhillips		9. OGRID N	umber 217817
3. Address of Operator P. O. Box 51		10. Pool nam	
Midland, TX	79710	Queen/Penrose	SR/Y
4. Well Location	arcen/F		
Unit Letter B: 660 feet from the North line and 1980 feet from the East line			
Section 22	Township 21S Range		County Lea
	11. Elevation (Show whether DR, RKB 3597) GL	, RT, GR, etc.)	
	3391 GL		
12. Check A	ppropriate Box to Indicate Nature	of Notice, Report or Otl	ner Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK			ALTERING CASING
		MMENCE DRILLING OPNS.] PANDA [
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB] .
DOWNHOLE COMMINGLE			
OTHER:		IER: tbg depth	\square
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.			
proposed completion of recompletion.			
06/11/14 RIH w/113 jts, 2 3/8", 4.7#, J-55 tbg & re-set @ 3646'.			
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		,	
		•	
,			
Spud Date:	Rig Release Date:	•	
I hereby certify that the information a	bove is true and complete to the best of	my knowledge and belief.	
SIGNATURE Thomas 2	TITLE Staff Regula	tory Technician	DATE <u>07/17/2014</u>
Type or print name Rhonda Rogers E-mail address: rogerrs@conocophillips.com PHONE: (432)688-9174			
For State Use Only			
APPROVED BY MALL STATE TO A STATE			
Conditions of Approval (if any):			
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