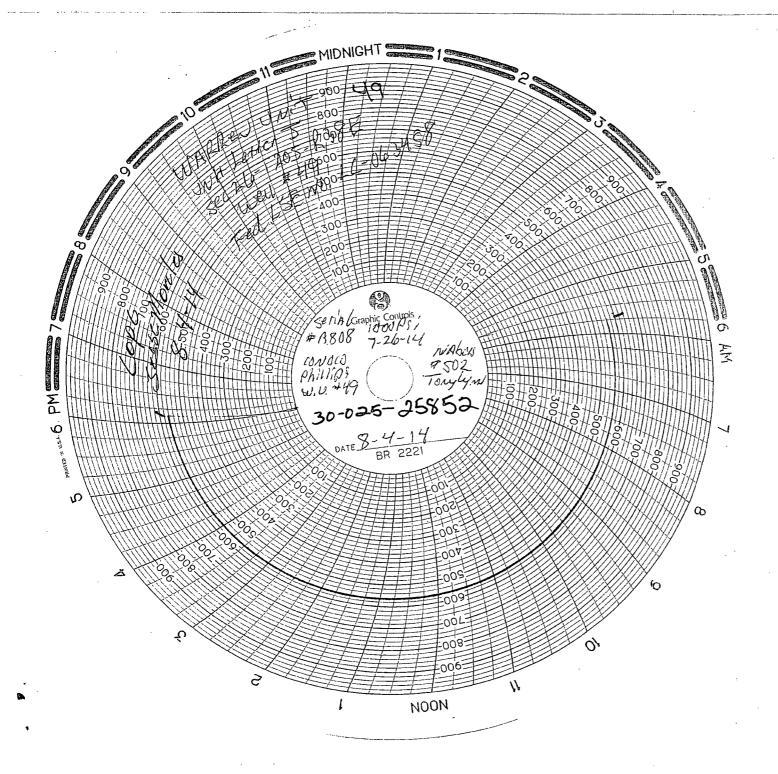
Submit Copy To Appropriate District Office	trict I = (575) 748-1283 Energy, Minerals and Natural Resources Energy, Minerals and Natural Resources CH. CONSERNATION DIVISION		Form C-103 Revised August 1, 2011		
District 1 ~ (575) 393-6161 1625 N. French Dr., Hobbs. NM 88240			WELL API NO.	August 1, 2011	
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210			30-025-258	352	
<u>District III</u> – (505) 334-6178	District III – (505) 334-6178 1220 South St. Francis Dr.		5. Indicate Type of Lease STATE FE	r 🗆	
1000 Rio Brazos Rd., Aztec. NM 87410 District IV – (505) 476-3460 Santa Fe, NM 87505		6. State Oil & Gas Lease No			
1220 S. 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			7. Lease Name or Unit Agre Warren Unit blinebry Tubb W	7. Lease Name or Unit Agreement Name Warren Unit blinebry Tubb WF	
PROPOSALS.) 1. Type of Well: Oil Well Gas Well X Other Injection			8. Well Number ₀₄₉	8. Well Number ₀₄₉	
2. Name of Operator ConocoPhillips Company ConocoPhillips Company			9. OGRID Number		
•			217817 10. Pool name or Wildcat		
3. Address of Operator P. O. Box 518 Midland, TX	810 79710	AUG 1 8 2014			
4. Well Location			Warren, Blinebry: Oil & Gas		
Unit Letter J : 19	980 feet from the	SouthRECEIVED line and	1980 feet from the East	line	
Section 26	Township 20S		NMPM County le	ea	
	11. Elevation (Show wh	ether DR, RKB, RT, GR.	etc.)		
			Av.		
12. Check Ap	propriate Box to Inc	licate Nature of Noti	ce, Report or Other Data		
NOTICE OF INT	ENTION TO:	l s	UBSEQUENT REPORT O	F·	
	PLUG AND ABANDON	☐ REMEDIAL W		GCASING	
 -	CHANGE PLANS	_ :	DRILLING OPNS. P AND A		
	MULTIPLE COMPL	☐ CASING/CEM	IENT JOB		
DOWNHOLE COMMINGLE	•				
OTHER:		OTHER: 5 year		X	
	i). SEE RULE 19.15.7.1		, and give pertinent dates, including Completions: Attach wellbore dia		
• • •	•				
8/4/14 ConocoPhillips Company ran	1 the 5 year MIT for this	s well to 300#/30 min - t	est good, chart attached.		
•					
Spud Date:	Rig R	elease Date:			
N					
I hereby certify that the information at	ove is true and complete	e to the best of my know	edge and belief.		
) .				
SIGNATURE Storma T	ones TITL	E Staff Regulatory Tech	nician DATE 08/11/2	2014	
T					
Type or print name Rhonda Rogers For State Use Only	E-ma	il address: rogerrs@con	ocophillips.com PHONE: (432	2)088-9174	
a 0					
1000 OLUMB BLL / 1000	,	مد و رس	-		
APPROVED BY: / Dill Soma Conditions of Approval (if any):	make TITL	Staff Was	age DATE 8/1	8/2014	



FOR RECORD ONLY