

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

HOBBS OCD

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised August 1, 2011

MAR 25 2015

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

RECEIVED

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. 30-025-38989 ✓
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other Injection Well <input checked="" type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator ConocoPhillips Company ✓		6. State Oil & Gas Lease No. BLM NMLC 059001
3. Address of Operator P. O. Box 51810 Midland, TX 79710		7. Lease Name or Unit Agreement Name MCA Unit ✓
4. Well Location Unit Letter A : 10 feet from the North line and 525 feet from the East line Section 33 Township 17S Range 32E NMPM County Lea ✓		8. Well Number 420 ✓
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 217817
		10. Pool name or Wildcat Maljamar; GB-SA

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: 5 year MIT <input checked="" 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.

ConocoPhillips Company performed & charted the 5 yr MIT on 3/12/15 to 620#/35 mins - test good.
Attached is a chart.

Spud Date:

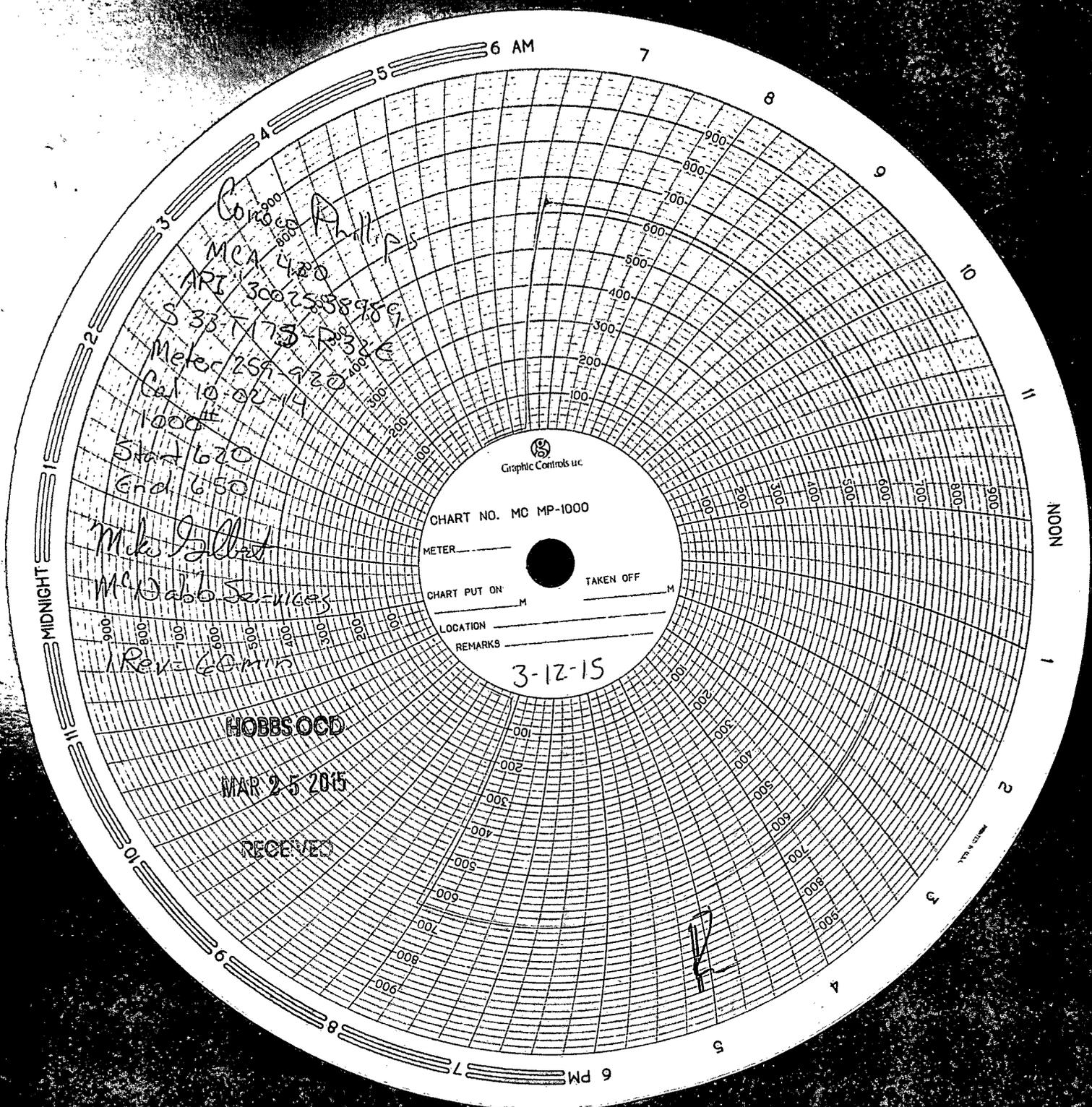
Rig Release Date:

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

SIGNATURE Rhonda Rogers TITLE Staff Regulatory Technician DATE 03/23/2015
Type or print name Rhonda Rogers E-mail address: rogerrs@conocophillips.com PHONE: (432)688-9174
For State Use Only

APPROVED BY: Bill Lerman TITLE Staff Manager DATE 3/31/2015
Conditions of Approval (if any):

APR 02 2015 



Corro Phillips
MC4 420
ART 3002588989
S 33 T 173 R 33
Meter 259 920
Cal 10-02-14
1000 ft
Start 620
End 650

Mike Gilbert
McDabb Services
Rev: Comm

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CHART NO. MC MP-1000

METER _____

CHART PUT ON _____ M TAKEN OFF _____ M

LOCATION _____

REMARKS _____

3-12-15

MIDNIGHT

NOON

6 AM

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