Submit I Copy To Appropriate District Office	State of New Mexico		Form C-103
District 1 – (575) 393-6161 Energy, Minerals and Natural Resources		Revised August 1, 2011 WELL API NO.	
1625 N. French Dr., Hobbs. NM 88240 <u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 88740 2 5 2015 Santa Fe, NM 87505			30-025-39349
			5. Indicate Type of Lease
			STATE FEE 6. State Oil & Gas Lease No.
District IV - (505) 476-3460 WINK & G 2013 Santa Fe, INIVI 8/303 1220 S. St. Francis Dr., Santa Fe, NM			
87505 SUNDRY NGOTAVES AND REPORTS ON WELLS			LC057210 BLM Lease Name or Unit Agreement Name
(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.)			MCA Unit 🗸
1. Type of Well: Oil Well Gas Well Other Injection well			8. Well Number 475
2. Name of Operator ConocoPhillips Company			9. OGRID Number 217817
3. Address of Operator P. O. Box 51810 Midland, TX 79710			10. Pool name or Wildcat Maljamar; GB-SA
4. Well Location			ivialjanai, OD-5A
Unit Letter 1 : 2580 feet from the South line and 810 feet from the East line			
Section 27	Township 17S R	lange 32E	NMPM County Lea
	11. Elevation (Show whether DF	R, RKB, RT, GR. etc.,	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WOR	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRI	-
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	r Job 🔲
DOWNHOLE COMMINGLE			
OTHER:		OTHER: 5 year M	
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 590#/35 mins - test good. Attached is a chart.			
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Spud Date:	Rig Release D	Pate:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE HOND	TITLE Staff I	Regulatory Technicia	an DATE 03/23/2015
Type or print name Rhonda Rogers C E-mail address: rogerrs@conocophillips.com PHONE: (432)688-9174			
For State Use Only			
APPROVED BY: Bell Samamah TITLE Staff Warage DATE 3/31/2015			
Conditions of Approval (if any):		7	

APR 0 2 2015

