

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

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised August 1, 2011

OIL CONSERVATION DIVISION
 1220 South 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 PROPOSALS.)		WELL API NO. 30-025-41709 ✓
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator CONOCOPHILLIPS COMPANY ✓		6. State Oil & Gas Lease No.
3. Address of Operator 600 NORTH DAIRY ASHFORD P-10 HOUSTON, TX 77079		7. Lease Name or Unit Agreement Name RED HILLS WEST 16 SATE W3
4. Well Location Unit Letter A : 250 feet from the NORTH line and 330 feet from the EAST line Section 16 Township 26S Range 32E NMPM County LEA ✓		8. Well Number 9H ✓
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3226		9. OGRID Number 217817

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

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

2/20/2015 RIH W/ 9 5/8" W/ INTERMEDIATE CASING W/114 JTS, 9 5/8", 40#, L-80 CSG SET @ 4,664. PUMPED 1,037sx (486 bbls) of CLASS-C LEAD CMT & 345sx (83 BBLs) OF CLASS-C TAIL CMT.
 3/3/2015 RIH W/ INTERMEDIATE 2 CASING W/ 262 JTS, 7 5/8", 33.70#, P-110 CSG SET @ 12,036. PUMPED 410SX (174 BBLs) OF CLASS-H LEAD CT & 114SX (30 BBLs) OF CLASS-H TAIL CMT. DISP W/ 500 BBLs OF BRINE @ 5 BPM, 33 BBLs @ 2 BPM, BUMPED PLUG, FLOATS HELD, GOOD RETURNS THROUGHOUT JOB.
 4/3/2015 RIH W/ PRODUCTION CASING W/ 357 JTS, 5 1/2", 23#, P-110 CSG SET @ 16,319. PUMPED 137 BBLs OF CLASS-H LEAD CMT & 718SX (137 BBLs) OF CLASS-H TAIL CMT. DISP W / 318 BBLs (20 BBLs FRESH WATER/298 BBL 10.0 PRG BRINE) PLUG DID NOT BUMP. PUMPED ADDITIONAL .5 BBLs AND PLUG STILL DID NOT BUMP. AVG DISPLACEMENT WAS 2.3 BPM. HELD PRESSURE FOR 5 MINS. AND BLED BACK 3 BBL-FLOATS HELD.
 4/05/2015 ND BOP NU WH RDMO.

Spud Date: 07/24/2014 Rig Release Date: 04/05/2015

recomp _____ Add new well _____
 Cancl Well _____ Create Pool _____
 E-PERMITTING -- New Well _____
 Comp _____ P&A _____ TA _____
 CSNG MB Loc Chng _____

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

SIGNATURE Tamarica Stewart TITLE STAFF REGULATORY TECHNICIAN DATE 04/10/2015

Type or print name TAMARICA STEWART E-mail address: Tamarica.Stewart@conocophillips.com PHONE: (281)206-5612

For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 04/22/15

Conditions of Approval (if any):

APR 27 2015

AM