| Submit 1 Copy To Appropriate District | State of New Mexico | | Form C-103 | |
|--|--|------------------------|-----------------------------|--|
| Office | Energy, Minerals and Natural Re | nouroos | Revised August 1, 2011 | |
| <u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 | Energy, Minerals and Natural Re- | sources WELL A | | |
| <u>District II</u> – (575) 748-1283 | OIL CONCEDUATION DIVI | | 30-025-42072 | |
| 811 S. First St., Artesia, NM 88210 | | | te Type of Lease | |
| <u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410 | 1220 South St. Francis Dr. | | STATE X FEE | |
| <u>District IV</u> - (505) 476-3460 | Santa Fe, NM 8/505 | | Oil & Gas Lease No. | |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | | | |
| The state of the s | CES AND REPORTS ON WELLS | 7. Lease | Name or Unit Agreement Name | |
| (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A | | 170 07 | bo Unit | |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) HOBBS OCD | | ĈD | | |
| 1. Type of Well: Oil Well \(\overline{\text{X}} \) Gas Well \(\overline{\text{O}} \) Other | | 8. Well N | Number 707 | |
| 2. Name of Operator ConocoPhillips Company JUN 0 8 2015 | | 015 9. OGRI | D Number | |
| | | | 217817 name or Wildcat | |
| 3. Address of Operator P. O. Box 51810 Midland, TX 79710 | | | | |
| 4. Well Location | RECEIVE | Vacuum; A | Abo Keef | |
| | | | | |
| Unit Letter B: 285 feet from the North line and 1674 feet from the East line | | | | |
| Section 34 | Township 17S Range 33 | | County Lea | |
| | 11. Elevation (Show whether DR, RKB, 23913' GL | K1, GK, etc.) | | |
| | 3913 GL | | | |
| 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 WORK ALTERING CASING | | | | |
| TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A | | | | |
| PULL OR ALTER CASING | | | | |
| DOWNHOLE COMMINGLE | | | | |
| OTHER: OTHER: completion sundry | | | | |
| 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. | | | | |
| | | | | |
| 1/13/15 RIH & perf f/9085'-8811'. | | | | |
| 1/17/15 pump 389 bbls 15% HCL, 51 bbls block, 808 bbls brine spacer & 202 bbls flush. | | | | |
| 1/17/15 RIH & perf f/8738'-8320'. 1/19/15 pump 391 bbls 15% HCL, 51 bbls block, 808 bbls brine spacer & 198 bbls flush. | | | | |
| 5/15/15 RIH w/272 jts, 2 7/8", 6.5#, L-80 tbg & set @ 8868' & ESP pump. | | | | |
| 5/18/15 NDBOP & NUWH. RDMO | | | | |
| Attached is an "As built Plat" & DD survey. | | | | |
| | | | | |
| • | | | | |
| | | | | |
| | | | | |
| | | | | |
| C. ID. | D'a Palaca Data | | | |
| Spud Date: | Rig Release Date: | | | |
| | | | | |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. | | | | |
| Thereby certify that the information above is true and complete to the best of my knowledge and benefit | | | | |
| |) | | | |
| SIGNATURE Nonth | TITLE Staff Regulato | ry Technician | DATE <u>06/03/2015</u> | |
| Towns an animal service DI 1 D | () | | DUONE (422)(02 2174 | |
| Type or print name Rhonda Rogers For State Use Only | E-mail address: roger | rrs@conocophillips.com | PHONE: <u>(432)688-9174</u> | |
| | | | | |
| APPROVED BY: | TITLE Petroleum! | Engineer | DATE 09/11/15 | |
| Conditions of Approval (if any): | | ŧ | | |