Submit 3 Copies To Appropriate District State of New Mexico, Office Energy Minerals and Natural Resources	Form C-103
District I	Revised March 25, 1999 WELL API NO.
1625 N. French Dr., Hobbs, NM 87240 District II OIL CONSERVATION DIVISION	30-025-35573
District III 2040 South Pacheco	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV	STATE STATE STATE
2040 South Pacheco, Santa Fe, NM 87505	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH	O A 7. Lease Name or Unit Agreement Name:
PROPOSALS.)	LEAMEX
1. Type of Well: Oil Well Oil Well Gas Well Other INJECTION	
2. Name of Operator	8. Well No.
ConocoPhillips Company	61
3. Address of Operator	9. Pool name or Wildcat
4001 Penbrook Street Odessa, TX 79762 4. Well Location	MALJAMAR (GRAYBURG-SAN ANDRES)
Unit Letter <u>C: 660</u> feet from the <u>NORTH</u> line and <u>1940</u> feet from the <u>WEST</u> line	
Section 25 Township 17-S Range 33-	E NMPM County LEA
10. Elevation (Show whether DR, RKB, RT, C	
4126' KB/ 4125' DF/ 4112' GL 11. Check Appropriate Box to Indicate _l Nature of Notice, Report, or Other Data	
	SUBSEQUENT REPORT OF:
TEMPORARILY ABANDON CHANGE PLANS COMMENCE D	RILLING OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING MULTIPLE CASING TEST COMPLETION	
OTHER: OTHER: Ran	Integrity Test & RETURN T/INJECTION
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.	
07/03/03 Rigged up Hydro-test - Picked up and RIH w/Redressed G-6 Packer RDMO	
07/00/02 Due Mahamias I Intermity test. Directory Due to start the test of the	
07/08/03 Run Mchanical Integrity test. Rigged up Pump truck and chart recorder, pressured up casing to 500# for 30 mins. Good test rigged down pump truck. Chart attached.	
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	OCD CD
I hereby certify that the information above is true and complete to the best of my knowledge and	haliaf
Thereby could be and complete to the best of my knowledge and $\mathcal{T}_{\mathcal{L}}$.	benet.
SIGNATURE UND STANCE TITLE Regulatory	Assistant DATE <u>07/11/03</u>
Type or print name ALVA FRANCO,	Telephone No. 915/368-1488
(This space for State use)	
(This space for State use) APPROVED BY <u>Jany</u> W. Wink <u>OC FIELD REPRESENTATIVE II/STAFF MANAGER</u> Conditions of approval, if any:	
Conditions of approval, if any:	





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