

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  
 MAR 26 2018  
 RECEIVED

State of New Mexico  
 Energy, Minerals and Natural Resources  
**OIL CONSERVATION DIVISION**  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

Form C-103  
 Revised August 1, 2011

<p style="text-align: center;"><b>SUNDRY NOTICES AND REPORTS ON WELLS</b></p> <p>(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.)</p> <p>1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other INJECTION WELL</p> <p>2. Name of Operator            ConocoPhillips Company</p> <p>3. Address of Operator            P. O. Box 51810            Midland, TX 79710</p> <p>4. Well Location            Unit Letter <u>M</u> : <u>660</u> feet from the <u>SOUTH</u> line and <u>660</u> feet from the <u>WEST</u> line            Section <u>27</u> Township <u>20S</u> Range <u>38E</u> NMPM County <u>LEA</u></p> <p>11. Elevation (Show whether DR, RKB, RT, GR, etc.)</p>	<p>WELL API NO.            30-025-07942</p> <p>5. Indicate Type of Lease            STATE <input type="checkbox"/> FEE <input type="checkbox"/></p> <p>6. State Oil &amp; Gas Lease No.            FEDERAL LEASE</p> <p>7. Lease Name or Unit Agreement Name            WARREN UNIT BLINEBRY TUBB WF</p> <p>8. Well Number   026</p> <p>9. OGRID Number            217817</p> <p>10. Pool name or Wildcat            WARREN</p>
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**12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data**

<p style="text-align: center;"><b>NOTICE OF INTENTION TO:</b></p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/></p> <p>TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/></p> <p>PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/></p> <p>DOWNHOLE COMMINGLE <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>	<p style="text-align: center;"><b>SUBSEQUENT REPORT OF:</b></p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/></p> <p>CASING/CEMENT JOB <input type="checkbox"/></p> <p>OTHER: 5 YEAR MIT <input checked="" type="checkbox"/></p>
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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 CONDUCTED THE 5 YEAR MIT 3/14/18 TO 520#/32 MINS - TEST GOOD. CHART ATTACHED

Spud Date:

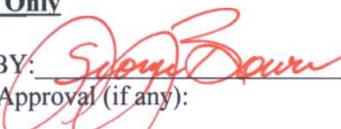
Rig Release Date:

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

SIGNATURE  TITLE Staff Regulatory Technician DATE 03/22/2018

Type or print name Rhonda Rogers E-mail address: rogerrs@conocophillips.com PHONE: (432)688-9174

**For State Use Only**

APPROVED BY:  TITLE Compliance Officer DATE 3/26/18

Conditions of Approval (if any):

NOON

6 PM

6 AM

MIDNIGHT

CHART NO. MC MP-1000  
 METER  
 CHART PUT ON \_\_\_\_\_ M  
 TAKEN OFF \_\_\_\_\_ M  
 REMARKS 3-14-18

START  
 Anna C YIC  
 Conoco Phillips  
 Warren Unit Blinberry Twp

30-015-07842  
 W 27 205 38 E  
 Set # 15698  
 1000# 1418  
 Start 500  
 32 min  
 End 500  
 Kelly Fortner - OCB  
 CDT Energy

END

