| - | | | | | | |
|--|---|----------------|--|---|-----------------------------------|-----------|
| Submit One Copy To Appropriate District Office | State | of New Me | exico | | Form C- | 103 |
| District I 1625 N. French Dr., Hobbs, NM 88240 | Energy, Minera | ls and Natu | iral Resources | WELL API NO | Revised August 1, 2 | 2011 |
| District II 811 S. First St., Grand Ave., Artesia, NM | OIL CONSE | RVATION | BIVISION | | 30-025-28423 | |
| 88210 District III | 1220 Sou | ith St. Frai | ncis Dalo | Indicate Typ STATE | | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | Santa | Fe, NM | 7505 | 6. State Oil & 0 | | |
| District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | R | ECENED | 31118 | | |
| 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 | | | | 7. Lease Name or Unit Agreement Name LEAMEX | | |
| PROPOSALS.) 1. Type of Well: \(\overline{\text{N}}\) Oil Well \(\overline{\text{Gas Well}}\) Other | | | | 8. Well Number 036 | | |
| 2 Name of Operator | | | | 9. OGRID Nun | mber | |
| ConocoPhillips Company 3. Address of Operator P. O. Box 51810 Midland, TX 79710 | | | | 10. Pool name | 217817 | |
| 3. Address of Operator P. O. Box 31810 Midiand, 1X 79710 | | | | MALJAMAR; GB-SA | | |
| 4. Well Location | 1) | 10 | ,00 | - | | |
| | _ / - | | feet from the | line | | |
| Section Township | P Range 3. | | | | | |
| | 4184' GL | | | | | |
| 12. Check Appropriate Box to I | ndicate Nature of | Notice, R | eport or Other Dat | ta | | |
| TEMPORARILY ABANDON | ENTION TO: PLUG AND ABANDO CHANGE PLANS MULTIPLE COMPL | ON 🗆 | SUBS REMEDIAL WORK COMMENCE DRILL CASING/CEMENT | ☐ LING OPNS.☐ | EPORT OF: ALTERING CASING P AND A | _ |
| OTHER: | | | □ Location is real | dy for OCD ins | pection after P&A | |
| All pits have been remediated in c Rat hole and cellar have been fille | | | ne terms of the Operat | tor's pit permit a | and closure plan. | |
| Rat hole and cellar have been fille A steel marker at least 4" in diame | | | | | | |
| OPERATOR NAME, LEAS UNIT LETTER, SECTION PERMANENTLY STAMPI | , TOWNSHIP, AND | RANGE. | All INFORMATION | | | |
| ∑ The location has been leveled as r | nearly as possible to o | original grou | nd contour and has be | en cleared of al | l junk, trash, flow lines | and |
| other production equipment. X Anchors, dead men, tie downs and | risers have been cut | off at least t | wo feet below ground | d level | | |
| If this is a one-well lease or last re | emaining well on leas | e, the battery | y and pit location(s) h | ave been remed | | |
| OCD rules and the terms of the Operat from lease and well location. | or's pit permit and cl | osure plan. | All flow lines, produc | ction equipment | and junk have been rem | oved |
| X All metal bolts and other materials | have been removed. | Portable ba | ses have been remove | ed. (Poured onsi | te concrete bases do not | have |
| to be removed.) All other environmental concerns | have been addressed | as per OCD | rules | | | |
| X Pipelines and flow lines have been | | | | All fluids have b | been removed from non- | (T |
| retrieved flow lines and pipelines. | | | | | | |
| When all work has been completed, re- | urn this form to the a | ippropriate I | District office to sched | lule an inspection | on. | |
| SIGNATURE DONA | Loger | _TITLE_Sta | aff Regulatory Techni | cian | DATE <u>05/16/2018</u> | |
| TYPE OR PRINT NAME Rhonda Ro For State Use Only | gers | _E-MAIL: | rogerrs@conocophil | lips.com | PHONE: <u>(432)688-91</u> | <u>74</u> |
| APPROVED BY: Wall | Litalen | _title_F | ES. | | DATE 05/30/ | 2018 |
| Conditions of Approval (if any): | | | | | • | |