Submit I Copy To Appropriate District	State of New Me	evico	Form C-1
 Office * <u>District I</u> – (575) 393-6161 	Energy, Minerals and Natural Resources		Revised July 18, 2
$\frac{D18(11001)}{1625}$ N. French Dr., Hobbs, NM 88240			WELL API NO.
District II - (575) 748-1283	OIL CONSERVATION	DIVISION	30-025-07831
811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178			5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505		6. State Oil & Gas Lease No.
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM			Federal Lease
87505	CONDERED ON WELL		
(DO NOT USE THIS FORM FOR PROPOSA DIFFERENT RESERVOIR. USE "APPLICA	TION FOR PERMIT" (FORM C-101) FOR	UG BACK TO A OR SUCH	7. Lease Name or Unit Agreement Name Warren Unit
PROPOSALS.) 1. Type of Well: Oil Well G	as Well 🔲 Other Injection 🚧		8. Well Number 028
2. Name of Operator		088900	9. OGRID Number
ConocoPh	as Well Other Injection		217817
3. Address of Operator	Λ	MAR 1 1 2020	10. Pool name or Wildcat
P. O. E	Box 2197. Houston, TX 77252	2020	Warren;Mckee
4. Well Location	RE		
Unit Letter J : 19	80 feet from the South		0 feet from the East lir
Section 20	Township 20S Ra	ange 38E 🥏	NMPM County LEA
	11. Elevation (Show whether DR	, RKB, RT, GR, etc.,	
12. Check Ap	propriate Box to Indicate N	lature of Notice,	Report or Other Data
NOTICE OF INT	ENTION TO:	SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK 🗌	PLUG AND ABANDON 🔲	REMEDIAL WOR	K ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRI	LLING OPNS. P AND A [
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMEN	т јов 🔲
		OTHER: 5 year	MIT
OTHER: 13 Describe proposed or complet	ed operations (Clearly state all (d give pertinent dates, including estimated
). SEE RULE 19.15.7.14 NMA		mpletions: Attach wellbore diagram of
ConocoPhillips Company co Chart attached	onducted 5 year MIT on 3/3/20 to	560#/32 min-test go	bod
		r	
Spud Date:	Rig Release Da	ate:	
I hereby certify that the information ab	ove is true and complete to the b	est of my knowledg	e and belief.
	7	B	
$(\bot h (\cap$	5		
SIGNATURE // Con Con	TITLE Re	egulatory Coordinate	DATE 03/06/2020
	∂		
Type or print name <u>Rhonda Rogers</u> For State Use Only	E-mail address	s: <u>rogerrs@conoc</u>	ophillips.com PHONE: <u>832-486-2737</u>
For State Use Only	X T	^	1 - 112
APPROVED BY: MM	JOIL TITLE C	U .	$H_{\text{DATE}} 3 - 1/-2$
Conditions of Approval (if any)		- /	
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