Submit 3 Copies To Appropriate District Office	State of New Mexico				Form C-103	
District I	Energy, Minerals and Natural Resources			WELL API NO.	May 27, 2004	
1625 N. French Dr., Hobbs, NM 88240 District II	CIL CONCEDIATION DIVISION				30-025-29116	
1301 W. Grand Ave., Artesia, NM 88210 District III	d Ave., Artesia, NM 88210 OIL CONSER VATION DIVISION 1220 South St. Francis Dr.			5. Indicate Type of		
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505			STATE X 6. State Oil & Gas I			
1220 S. St. Francis Dr., Santa Fe, NM			B-2148	2000 110		
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A				7. Lease Name or U Leamex	Jnit Agreement Name	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)				8. Well Number	20	
Type of Well: Oil Well				9. OGRID Number	38	
ConocoPhillips Company					217817	
3. Address of Operator 4001 Penbrook Street Odessa, TX 79762				10. Pool name or Wildcat		
4. Well Location				Maljamar; Graybu	rg/San Andres	
	1980 feet from the	North	line and _99	0 feet from	the East line	
Section 25	Township 17		e 33-E		CountyLea	
Pit or Below-grade Tank Application 🔲 o	11. Elevation (Show w 4076' GR	hether DR, R.	KB, RT, GR, etc.) is the		
	aterDistance from no	arest fresh wate	er well Dis	tance from nearest surfac	e water	
Pit Liner Thickness: mil Below-Grade Tank: Volumebbls; Construction Material						
12. Check A	Appropriate Box to In	ndicate Nati	ure of Notice,	Report or Other D)ata	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:						
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING						
TEMPORARILY ABANDON	CHANGE PLANS				AND A	
PULL OR ALTER CASING	MULTIPLE COMPL		CASING/CEMEN	T JOB		
OTHER:				ew Temporary Aband		
 Describe proposed or comp of starting any proposed we or recompletion. 						
10/06/06						
Mechanical Integrity Test attached,	request renewal of 5 year	ar Temporary	Abandonment st	atus.		
OAL						
123.00	· ma					
This Approval of Temporary Abandonment Expires 10/6/1/						
4 2 2 3	Aban	donment	Expirea	18/6/11		
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\						
180						
I hereby certify that the information	above is true and compl	ete to the best	of my knowledg	e and belief I further	certify that any nit or below-	
grade tank has been/will be constructed or	closed according to NMOCI	guidelines [],	a general permit	or an (attached) alternati	ive OCD-approved plan .	
SIGNATURE CILLISTA	1. Wali		atory Specialist		DATE 10/12/06	
Type or print name Celeste G. Dale For State Use Only		E-mail address: celeste.g.dale@conocophillips.Feliphologic No. (432)368-1667				
APPROVED BY:		OC I _TITLE	IEFD KEI KEOF.	1	DATE OCT 1 6 2006	
Conditions of Approval (if any):		_1111111			DATE - 0 2000	

