Submit 3 Copies To Appropriate District Office	State of New M		Form C-103
District I	Energy, Minerals and Nati	ural Resources	June 19, 2008
1625 N. French Dr., Hobbs, NM 88240			WELL API NO. 30-025-35466
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type of Lease
District III	1220 South St. Francis Dr.		STATE X FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 8	7505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM			
87505 SUNDRY NOT	CES AND REPORTS ON WELL	S	7. Lease Name or Unit Agreement Name
(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.)			State F-1
1. Type of Well: Oil Well X Gas Well Other			8. Well Number 11
2. Name of Operator ConocoPhillips Company			9. OGRID Number 217817 /
3. Address of Operator 3300 N. "A" Street, Bldg. 6			10. Pool name or Wildcat
Midland, TX 79705		Hardy; Blinebry	
4. Well Location			
Unit Letter S :	feet from the South	line and 18	30 feet from the West line
Section 1 Township 21S Range 36E NMPM County Lea			
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
3506' KB			
12. Check A	Appropriate Box to Indicate N	Nature of Notice,	, Report or Other Data
NOTICE OF IN	TENTION TO	l our	OCCUPAT DEDOCT OF
			SSEQUENT REPORT OF: RK □ ALTERING CASING □
TEMPORARILY ABANDON			_
DOWNHOLE COMMINGLE			_
			_
OTHER:	1-4-dti (Classic state all	OTHER:	nd give pertinent dates, including estimated date
			attach wellbore diagram of proposed completion
Request authority to add perfora	tions to the existing Blinebry comp	letion and fracture t	treat the zone.
Perforate the Blinebry from 5647-5652' (20 holes), 5680-5702' (48 holes), and 5770-5775' (20 holes), w/4 spf.  Perform acid ballout w/2200 gals. 15% Ferchek acid			
Fracture treat Blinebry w/53,000 gals., 100,000# 20/40 (Expedite Lite) sand			
			AUG 22 2008
			VOO T S SOLLY
			HRECOCT
G 1D4	Dia Dalassa D		
Spud Date:	Rig Release D	rate:	
<b>L</b>		*	
I hereby certify that the information	above is true and complete to the I	est of my knowled	ge and helief
i nercoy certify that the information	above is true and complete to the t	out of my knowicu	ge and belief.
	1 /		
SIGNATURE /////	Will TITLE Regu	latory Specialist	DATE 08/21/2008
T	79 11 11		THE PHONE WAS A SECOND
Type or print name Celeste G. Dale	E-mail addres	ss: <u>celeste.g.dale@</u>	conocophillips.coffHONE: (432)688-6884
For State Use Only			
11.	OC DISTRICT	CT SI PERMEAN	SENERAL MANAGES AUG 2 5 2008

Conditions of Approval (if any):