

Office

Energy, Minerals and Natural Resources

June 19, 2008

District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Ave., Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM 87505

87505

RECEIVED

MAR 03 2009

HOBBSOCD

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO. /
30-025-26420

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

B-2148

7. Lease Name or Unit Agreement Name

Leamex /

8. Well Number 19 /

9. OGRID Number 217817 /

10. Pool name or Wildcat

Maljamar: GB/SA

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 PROPOSALS.)

1. Type of Well: Oil Well ☐ Gas Well ☐ Other Injection ☐

2. Name of Operator

ConocoPhillips Company

3. Address of Operator

P.O. Box 51810 Midland, Tx 79710

4. Well Location

Unit Letter D : 660 feet from the North line and 660 feet from the West line
Section 24 Township 17S Range 33E NMPM County ✓

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

4124' GR

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐OTHER: Reactivated Injection Well ☒

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

The above injection well had been down due to a flowline issue. The flowline has been repaired and on February 15, 2009, the injection well was reactivated.

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

Sr. Regulatory Specialist

3/2/09

TITLE

DATE

Type or print name Donna WilliamsE-mail address: Donna.J.Williams@PHONE: 432-688-6943

For State Use Only

Conocophillips.com

APPROVED BY:

TITLE

DISTRICT 1 SUPERVISOR

DATE

Conditions of Approval (if any)

MAR 09 2009