| Submit One Conv. To Appropriate District Classes | Nov. Movies | | | E | orm C-103 |
|---|-------------------------|--------------------|------------------------------|-------------------------|-----------------------|
| Submit One Copy To Appropriate District Office District I 1625 N. French Dr., Hobbs, NM 88240 District II NUV 16 2000 CONSERVATION DIVISION | | | March 18, 2009 | | |
| District 1 1625 N. French Dr., Hobbs, NM 88240 | | | WELL API NO. | ~ · · · · · | $\sqrt{}$ |
| District II 1301 W. Grand Ave , Artesia, NM 88210 6 2005OIL CONSERVATION DIVISION | | | 30-025-(5. Indicate Type | | |
| District III HOBBSON 1220 South St. Francis Dr. | | | STATE | FEE_ | |
| 1000 Rio Brazos Rd., Aztec, NM 874 F6 SUL) Santa Fe, NM 87505 | | | 5. State Oil & G | as Lease No. | |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | | | | |
| SUNDRY NOTICES AND REPORTS ON WELLS | | | 7. Lease Name o | _ | nent 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 | | | O.L.Cole | non | ✓. |
| PROPOSALS.) | | | B. Well Number | <u> </u> | / |
| 1. Type of Well: Gas Well Other | | | 9. OGRID Number / | | |
| Name of Operator ConocoPhillips Company | | | 217817 | J | |
| 3. Address of Operator | | | 0. Pool name or | | |
| P.O. Box 51810 Midland, Tx 79710 | | [8 | funice he | aument | CB(SA |
| 4. Well Location | | 9 | | | |
| Unit Letter A: Low feet from the line and who feet from the line | | | | | |
| Section 17 Township 21S Range 3LE NMPM County LCO V 11. Elevation (Show whether DR, RKB, RT, GR, etc.) | | | | | |
| 3 LOT | | | | | |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | | | | | |
| | | | | | |
| NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON | N □ REME | SOBSI DIAL WORK | EQUENT RE | ALTERING (| |
| TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A | | | | | |
| PULL OR ALTER CASING MULTIPLE COMPL | CASIN | NG/CEMENT J | IOB 🗆 | | |
| OTHER: | | reation is read | dv for OCD insp | ection after F | ο Α [™] Α |
| OTHER: | | | | | |
| Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned. | | | | | |
| A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the | | | | | |
| OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR | | | | | |
| UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR | | | | | |
| PERMANENTLY STAMPED ON THE MARKER'S SURFACE. | | | | | |
| The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and | | | | | |
| other production equipment. | | | | | |
| Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level. | | | | | |
| If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed | | | | | |
| from lease and well location. | | | | | |
| All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have | | | | | |
| to be removed.) | | | | | |
| All other environmental concerns have been addressed as per OCD rules. Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non- | | | | | |
| retrieved flow lines and pipelines. | | | | | |
| | | · | • . | | |
| When all work has been completed, return this form to the appropriate District office to schedule an inspection. | | | | | |
| | | | | | |
| SIGNATURE | TITLE Sr. Re | egulatory | | _DATE1 | 1/12/09 |
| TYPE OF PRINT NAME Donna Williams | | a.J.Willia | | PHONE: 43 | 2-688-69/3 |
| TYPE OR PRINT NAME For State Use Only | E-MAIL: Conoc | cophillips | s.com | 1 110NE 4 2. | / |
| W. 11. H. | $\bigcap_{i \in I} f_i$ | M. | 2. | / | 17/026 |
| APPROVED BY: Wath White | TITLE SMP | vance CA | Yer | _DATE] / | 11/2009 |
| Conditions of Approval (if any): | 1 | | | | |