Submit One Copy To Appropriate District  State of New Me	exico	Form C-103
Office District I Energy, Minerals and Natu	ral Resources	March 18, 2009
1625 N. French Dr., Hobbs, NM 88240		WELL API NO. 30-025-02143
District II 1301 W. Grand Ave., Artesia And Color IVE OIL CONSERVATION DIVISION		5. Indicate Type of Lease
District III 1000 Rio Brazos Rd., Aztec, NAN 420 9 2010 District IV Santa Fe, NM 87505		STATE FEE
1220 S. St. Francis Dr., Santa February (1975)		6. State Oil & Gas Lease No. B-4118
87505 SUNDRY NOTICES AND REPORTS ON WELLS		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.)		Lea /
1. Type of Well: Oil Well Gas Well Other		8. Well Number #6
2. Name of Operator		9. OGRID Number
ConocoPhillips Company  3. Address of Operator		217817  10. Pool name or Wildcat
P.O. Box 51810 Midland, Tx 79710		Vacuum (GBSA)
4. Well Location		
Unit Letter 0: 1981 feet from the E line and 660 feet from the S line  Section 29 Township 17S Range 34E NMPM Lea County		
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
4071		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK		
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐	COMMENCE DRILI CASING/CEMENT	
POLE ON ALTER CASING   MOLTIFLE COMPL		
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.		
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SIGNATURE TITLE	Sr. Regulatory	Specialist 1/25/2010 DATE
TYPE OR PRINT NAME Donna Williams E-MAIL:	Donna.J.Willia Conocophillips	ems@ PHONE: 432-688-6943
For State Use Only	Conocophillips	5.COM
APPROVED BY: TITLE COMPLETIVE OFFICE DATE 2/2/10		
APPROVED BY: TITLE CONDITIONS OF Approval (if any): TITLE CONDITIONS OF Approval (if any): TITLE PA-OK TO RELEASE		
8	FM-UM	1- More Par