

Submit 1 Copy To Appropriate District
Office
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

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
October 13, 2009

RECEIVED
NOV 30 2010
HOBBSOCD

CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

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.)		WELL API NO. 30-025-07857 ✓
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator ConocoPhillips Company		6. State Oil & Gas Lease No. Federal Lease NMLC031695A
3. Address of Operator P.O. Box 51810 Midland, Tx 79710		7. Lease Name or Unit Agreement Name SEMU McKee ✓
4. Well Location Unit Letter <u>E</u> : 1980 feet from the <u>North</u> line and 990 feet from the <u>West</u> line Section <u>29</u> Township <u>20S</u> Range <u>38E</u> NMPM County <u>Iea</u> ✓		8. Well Number # 60 ✓
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number 217817 ✓
		10. Pool name or Wildcat Warren Drinkard

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: Name Change <input checked="" type="checkbox"/>		OTHER: <input type="checkbox"/>	

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

ConocoPhillips Company respectfully request that the well name be changed back to the SEMU McKee # 60 effective March 4, 2009.

OPER. OGRID NO. 217817
PROPERTY NO. 31447
POOL CODE 63080
EFF. DATE 3-4-09
API NO. 30-025-07857

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 Donna Williams TITLE Sr. Regulatory Advisor DATE 11/18/2010
Type or print name Donna Williams E-mail address: Donna.J.Williams@Conocophillips.com PHONE: 432-688-6943
For State Use Only

APPROVED BY: [Signature] TITLE PETROLEUM ENGINEER DATE DEC 01 2010
Conditions of Approval (if any):