

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720

District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170

District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico

Form C-101
Revised November 14, 2012

Energy Minerals and Natural Resources

Oil Conservation Division

☐ AMENDED REPORT

1220 South St. Francis Dr.

Santa Fe, NM 87505

HOBBS OCD

APR 17 2014

RECEIVED

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

¹ Operator Name and Address ConocoPhillips Company P. O. Box 51810 Midland, TX 79710		² OGRID Number 217817
		³ API Number 025-35931
⁴ Property Code 31317	⁵ Property Name Gach 31 State	⁶ Well No. 2

7. Surface Location

UL - Lot K	Section 31	Township 17S	Range 35E	Lot Idn	Feet from 1980	N/S Line South	Feet From 1500	E/W Line West	County Lea
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8. Proposed Bottom Hole Location

UL - Lot	Section	Township	Range	Lot Idn	Feet from	N/S Line	Feet From	E/W Line	County
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9. Pool Information

¹ Pool Name Vacuum Cisco/ VACUUM Corbin Wolfcamp	² Pool Code 61950/13310
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Additional Well Information

¹¹ Work Type plugback/recomp	¹² Well Type Oil	¹³ Cable/Rotary	¹⁴ Lease Type State	¹⁵ Ground Level Elevation 4096' GR
¹⁶ Multiple No	¹⁷ Proposed Depth 13,600'	¹⁸ Formation	¹⁹ Contractor	²⁰ Spud Date 06/29/2002
Depth to Ground water		Distance from nearest fresh water well		Distance to nearest surface water

21. Proposed Casing and Cement Program

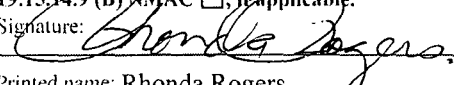
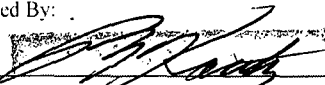
Type	Hole Size	Casing Size	Casing Weight/ft	Setting Depth	Sacks of Cement	Estimated TOC
surface	17 1/2"	13 3/8"	48#	446'	500 sx	0
intermedia	12 1/4"	9 5/8"	40#	4801'	1550 sx	0
production	8 3/4" 7 7/8" 5 1/2"	17#		13,588'	1050 sx	0

Casing/Cement Program: Additional Comments

During this procedure we plan to use the Closed-Loop System and haul content to the required disposal."

22. Proposed Blowout Prevention Program

Type	Working Pressure	Test Pressure	Manufacturer
Hydraulic			

²³ I hereby certify that the information given above is true and complete to the best of my knowledge and belief. I further certify that I have complied with 19.15.14.9 (A) NMAC <input type="checkbox"/> and/or 19.15.14.9 (B) NMAC <input type="checkbox"/> if applicable. Signature: 		OIL CONSERVATION DIVISION	
Printed name: Rhonda Rogers		Approved By: 	
Title: Staff Regulatory Technician		Title: Petroleum Engineer	
E-mail Address: rogers@conocophillips.com		Approved Date: 05/09/14 Expiration Date: 05/09/16	
Date: 04/16/2014	Phone: (432)688-9174	Conditions of Approval Attached	

MAY 12 2014