

Submit 1 Copy To Appropriate District Office

District I - (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II - (575) 748-1283
811 S. First St., Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION

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

Form C-103

Revised August 1, 2011

WELL API NO.	30-025-42117
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	B-2862-3
7. Lease Name or Unit Agreement Name	EAST VACUUM GB-SA UNIT
8. Well Number	529
9. OGRID Number	217817
10. Pool name or Wildcat	VACUUM; GB-SA
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3947' GL	

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 ☐

2. Name of Operator
ConocoPhillips Company

3. Address of Operator
P. O. Box 51810
Midland, TX 79710

4. Well Location
Unit Letter K : 1800 feet from the SOUTH line and 2115 feet from the WEST line
Section 33 Township 17S Range 35E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3947' GL

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: FIRST DELIVERY NOTICE ☒

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 FIRST DELIVERED THIS WELL 1/30/18.

Spud Date:

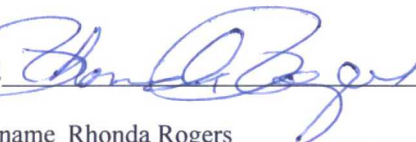
10/17/2017

Rig Release Date:

01/10/2018

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE



TITLE Staff Regulatory Technician

DATE 02/27/2018

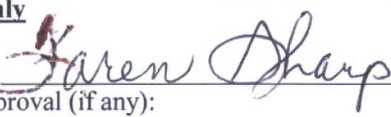
Type or print name Rhonda Rogers

E-mail address: rogerr@conocophillips.com

PHONE: (432)688-9174

For State Use Only

APPROVED BY:



TITLE Staff Mgr

DATE 3-7-18

Conditions of Approval (if any):