Submit 1 Copy To Appropriate District	State of New Me	exico	Form C-103	
Office District I – (575) 393-6161	Energy, Minerals and Natural Resources		Revised July 18, 2013	
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	ĺ
District II - (575) 748-1283	OIL CONSERVATION DIVISION		30-025-42104	
811 S. First St., Artesia, NM 88210			5. Indicate Type of Lease	
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE 🛛 FEE 🗌	
<u>District IV</u> – (505) 476-3460	Santa Fe, NM 87	7505	6. State Oil & Gas Lease No.	
1220 S. St. Francis Dr., Santa Fe, NM				
	TICES AND REPORTS ON WELL SALS TO DRILL OR TO DEEPEN OR PLU ICATION FOR PERMIT" (FORM C-101) FO Gas Well Other INJ WELL		7. Lease Name or Unit Agreement Name VACUUM GLORIETA EAST UNIT	
1. Type of Well: Oil Well	Gas Well 🔲 Other INJ WELL	" " V Z 2019	8. Well Number 114H	1
2. Name of Operator	RI	ECEIVED	9. OGRID Number 217817	
ConocoPhillips Company		TEIVED	10. Pool name or Wildcat	
3. Address of Operator P. O. BOX 51810, MIDLAND, T			VACUUM; GLORIETA	
4. Well Location				
	5feet from the _SOUTH line and	d 28 feet from the	e WEST line	
Section 27		35E NMPM		
	11. Elevation (Show whether DR,			
12. Check	Appropriate Box to Indicate N	ature of Notice,	Report or Other Data	
	NTENTION TO:	SUB	SEQUENT REPORT OF:	
PERFORM REMEDIAL WORK		REMEDIAL WORK	·	
	CHANGE PLANS	COMMENCE DRI		
PULL OR ALTER CASING		CASING/CEMENT		
		CASING/CEMENT	^	
CLOSED-LOOP SYSTEM			t H	
OTHER:		OTHER: 5 yr Ml	т 🕅	
	nleted operations (Clearly state all I		give pertinent dates, including estimated date	
			npletions: Attach wellbore diagram of	
proposed completion or re-			ipietions. Triaten wendore diagram of	
proposed completion of re-	TA STATUS			
	D THE 5 YR MIT ON 2/25/19 TO 5	570#/32 MINS – TE	ST GOOD.	
CHART ATTACHED				
	This Approval of TA		3/7/21	
This Approval of TA EXPIRES: <u>3///2/</u> FINAL TA STATUS EXTENSION -				
	Well needs to be PLU	IGGED OF RETURN		
	BY THE DATE STATE	ED ABOVE: χ	·/	
	2			
ſ 		[
Spud Date:	Rig Release Da	ate:		
				-
I hereby certify that the information	above is true and complete to the be	est of my knowledge	e and belief.	
\square	~)			
SIGNATURE Thomas	E DOCKAD TITLE_REG	G TECH	DATE3/26/19	
			A A A A A A A A A A A A A A A A A A A	
Type or print nameRHONDA For State Use Only	RUGERS E-mail address: rog	gerts@conocopnillip	os.com_PHONE:432-688-9174	
	11 1		- 1/ ll. 16	
APPROVED BY: King	Johne TITLE Com	pliance ff	hien A DATE 4-8-19	
Conditions of Approval (if any).				

