Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
<u>District I</u> – (575) 393-6161	Energy, Minerals and Natural Resource	Revised August 1, 2011 WELL API NO.
1625 N. French Dr., Hobbs, NM 8824 HOBE <u>District II</u> – (575) 748-1283	BS OCD	20.025.26006
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 8744 2	7 2013 1220 South St. Francis Dr.	STATE X FEE
<u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	PM Atlant.	B-1400-3
SUNDRY NOTIC (DO NOT USE THIS FORM FOR PROPOS.	ES AND REPORTS ON WELLS ALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name East Vacuum GB-SA Unit Tract 3315
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		0. W 1131 1
1. Type of Well: Oil Well Gas Well X Other Injection Well		009
2. Name of Operator ConocoPhillips Company		9. OGRID Number 217817
3. Address of Operator p. O. Box 51810 Midland, TX 79710		10. Pool name or Wildcat
	. 79710	Vacuum Grayburg-San Andres
4. Well Location Unit Letter P: 350 feet from the South line and 350 feet from the East line		
Section 33	Township 17S Range 35E	NMPM County Lea
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3931' GR		
The state of the s		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO:		
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING		
TEMPORARILY ABANDON		
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB		
DOWNHOLE COMMINGLE		-
OTHER: Failed MIT	☑ OTHER:	
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.		
Because of failed MIT ConocoPhillips would like to MIRU to repair injection well above. ConocoPhillips will notify NMOCD before performing MIT after repair.		
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CONDITION OF APPROVAL: Notify OCD Hobbs Office 24 hours prior to running MIT Test & Chart.		
Office 24 nours prior to runni	ng MIT Test & Chart.	
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Spud Date:	Rig Release Date:	
Space Date.	Rig Release Date.	
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I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE SIGNATURE	TITLE Staff Pagulatory Tag	DATE 02/05/2012
SIGNATURE TITLE Staff Regulatory Technician DATE 03/25/2013		
Type or print name Rhonda Rogers E-mail address: rogerrs@conocophillips.com PHONE: (432)688-9174		
For State Use Only		
APPROVED BY: TITLE Petroleum Engineer DAROFK Q 5 2013		
APPROVED BY: Conditions of Approval (if any): TITLE DAMEL IN 11 5 2013		