	Form C-103
<ul> <li>Office</li> <li><u>District I</u> – (575) 393-6161</li> <li><u>1625 N. French Dr., Hobbs, NM 88240</u></li> </ul>	Revised August 1, 2011 WELL API NO.
District II – (575) 748-1283 811 S. First St., Artesia, NM 88210 MAR 0 2 2017 CONSERVATION DIVISION District III – (505) 334-6178	<u>30-025-26380</u>
$\underline{DSUCCIII} = (505) 554-0176$ [ZZU SOULD SL. FRANCIS DE	5. Indicate Type of Lease STATE X FEE /
1000 Rio Brazos Rd., Aztec, NM 87410 District IV - (505) 476-3460 Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM COLIVEL	B-1839-1
87505 SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(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	EAST VACUUM GB-SA UNIT TRACT 2738
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other Injection well	8. Well Number 007
2. Name of Operator ConocoPhillips Company	9. OGRID Number 217817
3. Address of Operator <sub>P. O. Box 51810</sub>	10. Pool name or Wildcat
Midland, TX 79710	VACUUM; GB-SA
4. Well Location Unit Letter E : 2570 feet from the NORTH line and 1110	feet from the WEST line
Section 27 Township 17S Range 35E	NMPM County LEA
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	Null M County ELA
3934' GL	
12 Check Appropriate Day to Indicate Mature of Matica 1	Percent on Other Data
12. Check Appropriate Box to Indicate Nature of Notice, I	Report or Other Data
	SEQUENT REPORT OF:
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRIL	
	JOB []
OTHER: OTHER: 5 YEAR	MIT & YEARLY BH TEST 🛛 🛛 🖊
<ol> <li>Describe proposed or completed operations. (Clearly state all pertinent details, and of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Com proposed completion or recompletion.</li> </ol>	
ON 2/17/17 CONOCOPHILLIPS COMPANY CONDUCTED THE 5 YEAR MIT TO 58	04/22 MINS TEST COOD CHAPT
ATTACHED.	50#/32 MINS - TEST 6000D, CHART
ATTACHED IS THE YEARLY BRADENHEAD TEST - TEST GOOD.	
Spud Date: Rig Release Date:	
Spud Date: Rig Release Date:	
	and belief.
Spud Date: Rig Release Date: I hereby certify that the information above is true and complete to the best of my knowledge	and belief.
I hereby certify that the information above is true and complete to the best of my knowledge	DATE 02/24/2017
I hereby certify that the information above is true and complete to the best of my knowledge SIGNATURE Mondate TITLE Staff Regulatory Technician	DATE 02/24/2017
I hereby certify that the information above is true and complete to the best of my knowledge         SIGNATURE       International complete to the best of my knowledge         SIGNATURE       International complete to the best of my knowledge         TITLE       Staff Regulatory Technician         Type or print name       Rhonda Rogers         E-mail address:       rogerrs@conocop         For State Use Only       ITTLE         APPROVED BY:       International complete to the best of my knowledge	DATE 02/24/2017
I hereby certify that the information above is true and complete to the best of my knowledge SIGNATURE Monda Rogers TITLE Staff Regulatory Technician Type or print name Rhonda Rogers E-mail address: rogerrs@conocop For State Use Only	DATE 02/24/2017 hillips.com PHONE: (432)688-9174

