

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

Form C-103  
Revised August 1, 2011

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-025-27330
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name EAST VACUUM GB-SA UNIT TRACT 1904
8. Well Number 003
9. OGRID Number 217817
10. Pool name or Wildcat VACUUM; GB-SA
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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 INJ WELL

2. Name of Operator  
ConocoPhillips Company

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

4. Well Location  
Unit Letter N : 1300 feet from the SOUTH line and 2625 feet from the WEST line  
Section 19 Township 17S Range 35E NMPM County LEA

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 ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER: ☐

OTHER: 5 YEAR MIT & YEARLY BH TEST ☒

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.

2/21/17 CONOCOPHILLIPS COMPANY CONDUCTED THE 5 YEAR MIT TO 580#/32 MINS - TEST GOOD. CHART ATTACHED  
BRADENHEAD TEST ATTACHED

Spud Date:

Rig Release Date:

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

SIGNATURE Rhonda Rogers TITLE Staff Regulatory Technician DATE 02/28/2017

Type or print name Rhonda Rogers E-mail address: rogerrs@conocophillips.com PHONE: (432)688-9174

For State Use Only

APPROVED BY: James Bowe TITLE Compliance Officer DATE 3/9/17

Conditions of Approval (if any):



6 AM

10

11

NOON

1

2

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5

6 PM

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10



Graphic Controls Inc

CHART NO. MC MP-1000

METER

CHART PUT ON

M

TAKEN OFF

M

LOCATION

REMARKS

6/12/72

Start

42°C

0200000000

0105000000

30-0000-5.115

11-19-0000-2.2330

1904

1410000000

1410000000

1410000000

1410000000

Start 5000

End 5000

3200

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Handwritten signature in red ink.