Submi 1 Copy To Appropriate District Coffice		T 0 100
Office	State of New Mexico	Form C-103
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources	Revised August 1, 2011 WELL API NO.
District II - (575) 748-1283	OIL CONSERVATION DIVISION	30-025-39642
811 S. First St., Artesia, NM 88210 District III – (505) 334-6178	1220 South St. Francis Dros Of	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87505	STATE X FEE
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM		6. State Oil & Gas Lease No.
87505	MAR 13 2017	
(DO NOT USE THIS FORM FOR PROPODIFFERENT RESERVOIR. USE "APPL	CICES AND REPORTS ON WELLS DISALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A FICATION FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name or Unit Agreement Name EAST VACUUM GB-SA UNIT TRACT 3333
PROPOSALS.) 1. Type of Well: Oil Well	Gas Well Other INJ WELL	8. Well Number 504
2. Name of Operator ConocoPhill	ips Company	9. OGRID Number 217817
3. Address of Operator _{P. O. Box}	51810	10. Pool name or Wildcat
Midland,	TX 79710	VACUUM; GB-SA
4. Well Location		
	2218feet from the NORTH line and 158	
Section 33	Township 17S Range 35E	NMPM County LEA
	11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
12 Check	Appropriate Box to Indicate Nature of Notice,	Report or Other Data
12. Check	Appropriate Box to indicate Nature of Notice,	Report of Other Data
NOTICE OF IN	NTENTION TO: SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING		
TEMPORARILY ABANDON	CHANGE PLANS COMMENCE DRI	
PULL OR ALTER CASING DOWNHOLE COMMINGLE	MULTIPLE COMPL CASING/CEMEN	I JOB
DOWNINGLE COMMINGLE		
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.		
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ATTACHED ATTACHED IS BH TEST. Spud Date: I hereby certify that the information SIGNATURE	Rig Release Date: above is true and complete to the best of my knowledge TITLE Staff Regulatory Technicia	e and belief. DATE 03/09/2017
ATTACHED ATTACHED IS BH TEST. Spud Date: I hereby certify that the information SIGNATURE Type or print name Rhonda Rogers	Rig Release Date: above is true and complete to the best of my knowledge TITLE Staff Regulatory Technicia	e and belief. DATE 03/09/2017
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