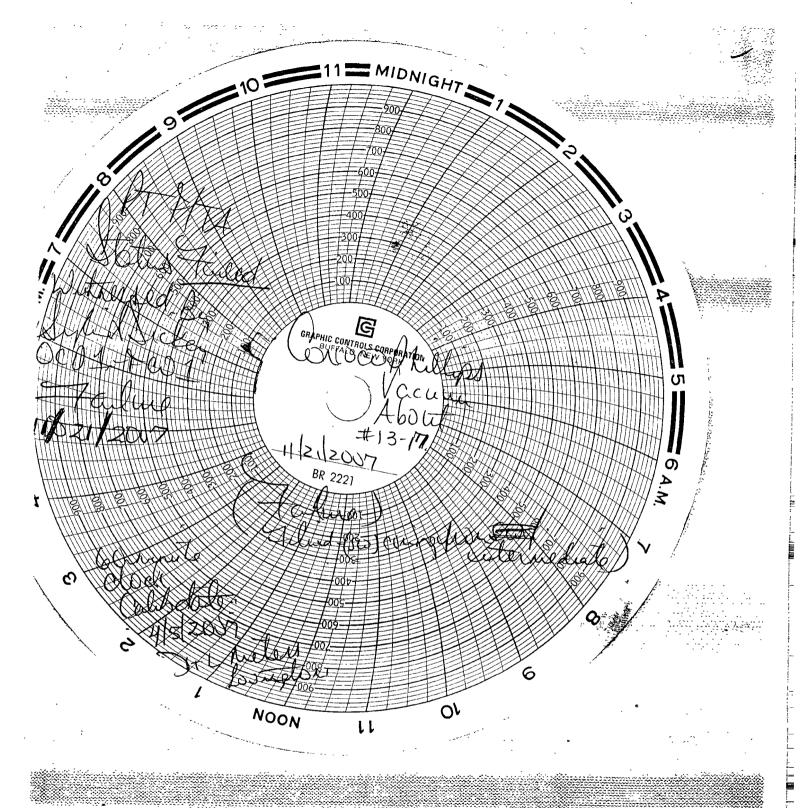
Feb. 29. 2008 3:00PM			No. 0805	P. 2	
Submit 5 Copies 10 Appropriate District Office	State of New Mexico			Form C-103	
District I	Energy, Minerals and Natural Resources		WELL API NO.	May 27, 2004	
1625 N. French Dr., Hobbs, NM 88240 District II			30-025	-03073	
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type of Lease		
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE X FEE		
District IV 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87505		6. State Oil & Gas Lease No.		
87505			B-1838		
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			7. Lease Name or Unit Agreement Name Vacuum Abo Unit Tract 13, Bity. 2		
PROPOSALS.) 1. Type of Well: Oil Well 🔀	Gas Weil Other	•	8. Well Number 17		
2. Name of Operator	of Operator			9. OGRID Number 217817	
ConocoPhillips Company			10. Pool name or Wildcat		
3. Address of Operator 3300 N. "A" Street, Bldg. 6 Midland, TX 79705			Vacuum; Abo Reef		
4. Well Location					
Unit Letter O ::	890 feet from the South	line and 22	feet from the E	ast line	
Section 5		Range 35E	NMPM CountyI	ea	
	11. Elevation (Show whether D	R, RKB, RT, GR, etc.,			
Pit or Below-grade Tank Application	3949' GL, 3964' RKB			自24年中央部院中央17年7年中	
Pit typeDepth to Groundy		water well Dist	ance from nearest surface water_		
Pit Liner Thickness: mil			nstruction Material	•	
12. Check	Appropriate Box to Indicate	nature of notice,	Report or Other Data		
NOTICE OF IN	ITENTION TO:	SUB	SEQUENT REPORT O)F:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON 🔲	REMEDIAL WOR		ig casing 🔲	
TEMPORARILY ABANDON 🔲	CHANGE PLANS	COMMENCE DRI			
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	L JOB []		
OTHER:Repair well failure and co	nvert to injection X	OTHER:		П	
13. Describe proposed or comp	pleted operations. (Clearly state al		d give pertinent dates, includir	ng estimated date	
	ork). SEE RULE 1103. For Multi				
or recompletion.					
		44 1	man a de la la		
11/21/2007 Well tested & failed. It converting well to injection, with N			Plans include repairing the c	asing and	
convering wen to injection, while	MICCO approvar of Application i	o mjour.			
			•		
				j	
				•	
				,	
	1/2/2				
Expire	25 .4/15/08	•			
I hereby certify that the information grade tank has been/will be constructed or					
A , ,	111				
SIGNATURE (MILLER	Y. Wale TITLER	egulatory Specialist	DATE 02	2/29/2008	
Type or print name Celeste G. Dale	E-mail	address:celeste.g.dale	@conocophillips Tele phone N	o. (432)688-6884	
For State Use Only	,	_	•		
A DEPOSITE DAY	OC DISTRI	CT SUFERVISOR/C	SENERAL MANAGER	MAR 13 200	
APPROVED BY: (Moo (Conditions of Approval (if any):	WILLE_		DATE	Province in the second	
Activitions or white are fix and).					



Vacuum Abo UNIT 13-17

O, Sec. 5-T185-R35E

Lea County NM

Lea County NM

Leonard Anderson UNDONS