

**District I**

1625 N. French Dr., Hobbs, NM 88240

**District II**

1301 W. Grand Ave., Artesia, NM 88210

**District III**

1000 Rio Brazos Rd., Aztec, NM 87410

**District IV**

1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

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

May 27, 2004

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)		WELL API NO. 30-025-20820
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator ConocoPhillips Company		6. State Oil & Gas Lease No. B-2354-2
3. Address of Operator 4001 Penbrook Street Odessa, TX 79762		7. Lease Name or Unit Agreement Name Vacuum Glorieta East Unit Tract 37
4. Well Location Unit Letter <u>H</u> : 2180 feet from the <u>North</u> line and <u>660</u> feet from the <u>East</u> line Section <u>31</u> Township <u>17-S</u> Range <u>35-E</u> NMPM County <u>Lea</u>		8. Well Number <u>4</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		9. OGRID Number <u>217817</u>
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		10. Pool name or Wildcat Vacuum Glorieta
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____		
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

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 ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

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

OTHER: TA Well ☒

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

- 8/30/04: SAFETY MEETING. MIRU WSU. BLEED DOWN WELL. POOH LAYING DOWN ROPS AND PUMP. ND WELLHEAD. NU BOP. CHANGE OUT WELLHEAD VALVES. SHUT DOWN AND SECURE THE WELL.
- 8/31/04: SAFETY MEETING. BLEED DOWN WELL. POOH LAYING DOWN PRODUCTION TUBING. MOVE IN WORKSTRING. TALLY WORKSTRING. TIH PICKING UP BIT, SCRAPER AND TUBING. SHUT DOWN AND SECURE THE WELL.
- 9/1/04: SAFETY MEETING. BLEED DOWN WELL. FINISH TIH W/ BIT, SCRAPER AND TBG TO 5939'. POOH W/ TBG, SCRAPER AND BIT. TIH W/ RBP, PKR AND TBG.
- 9/2/04: SAFETY MEETING. BLEED DOWN WELL. UNSET PKR. TIH TO RETRIEVE RBP. POOH W/ TBG, PKR AND RBP. SET RBP @ 4169'. TEST TO 500 PSI. HELD GOOD. UNSET RBP AND POOH.
- 9/3/04: SAFETY MEETING. BLEED WELL DOWN. POOH LAYING DOWN WORKSTRING. ND BOP. NU WELLHEAD. RDMO WSU. COULD NOT TA WELLBORE DUE TO CSG LEAK. WELL WILL BE PUT ON P&A LIST.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Stacey D. Linder TITLE HSE/Regulatory Representative DATE 09/15/2004

Type or print name Stacey D. Linder

E-mail address:

Telephone No. (432) 368-1506

For State Use Only

APPROVED BY: Gary W. Wink

OC FIELD REPRESENTATIVE II/STAFF MANAGER

Conditions of Approval (if any):

DATE