Submit 1 Copy To Appropriate District	State of New Mexico	Form C-103
Office District I	Energy, Minerals and Natural Resources	October 13, 2009 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II	,	30-025-26865
1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.	STATE X FEE
District IV	Santa Fe, NM 87505 6 2011	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	HOBBSOCD	B 1838-1
SUNDRY NOTIC	ES AND REPORTS ON WELLS LS TO DRILL OR TO DEEPEN OR PLUG BACK TO A TION FOR PERMIT" (FORM C-101) FOR SUCH	7. Lease Name or Unit Agreement Name EVGAU 3236
PROPOSALS.)		8. Well Number 008
1. Type of Well: Oil Well G	as Well X Other Injection	000
2. Name of Operator ConocoPhillip		9. OGRID Number 217817 10. Pool name or Wildcat
3. Address of Operator 3300 N "A" St, Bldg 6 Midland, TX 79705		Vacuum; Grayburg-San Andres
4. Well Location		
Unit Letter E : 2	feet from the North line and 50	feet from the West line
Section 32	Township 17S Range 35E	NMPM CountyLea
	11. Elevation (Show whether DR, RKB, RT, GR, etc.	
richt and a sale	3980' GR	California de la calendaria de la calend
		- 0.
12. Check Ap	propriate Box to Indicate Nature of Notice	, Report or Other Data
NOTICE OF INT	ENTION TO: SUF	SSEQUENT REPORT OF:
	PLUG AND ABANDON REMEDIAL WOR	
		RILLING OPNS. P AND A
	MULTIPLE COMPL CASING/CEMEN	IT JOB □
DOWNHOLE COMMINGLE		
•		
OTHER:	OTHER:	ad aire portinent dates including actimated date
of starting any proposed worl	ted operations. (Clearly state all pertinent details, as so.). SEE RULE 19.15.7.14 NMAC. For Multiple Completion	ompletions: Attach wellbore diagram of
proposed completion or recor	•	
4/20/2011 - 4/27/2011 Repaired do		
4/27/2011 Ran MIT, Chart attache 4/28/2011 Pump 2000 gals 15% ac	cid into perfs from 4582'-4362' displace with 45 bbls	water
1/20/2011 1 ump 2000 Bate x0/0 as	, and provide the second secon	
procession of the second of th		
Spud Date:	Rig Release Date:	
Space Bate.		
		·
I hereby certify that the information al	pove is true and complete to the best of my knowled	ge and belief.
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<i>Y</i> 1\2		
a in		
SIGNATURE)	TITLE Regulatory Specialist	DATE 05/11/2011
Type or print name Brian D Majorino		DATE 05/11/2011 0@conocophilips.PhtONE: (432)688-6913
Type or print name Brian D Majoring For State Use Only	E-mail address: brian.d.maiorin	
Type or print name Brian D Majorino For State Use Only APPROVED BY:		o@conocophilips.P&MONE: (432)688-6913
Type or print name Brian D Majoring For State Use Only	E-mail address: brian.d.maiorin	o@conocophilips.P&MONE: (432)688-6913
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