Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103 May 27, 2004	
District I 1625 N. French Dr., Hobbs, NM 88240	Dhorgy, withorars	and Italulai Resources	WELL API NO	
District II 1301 W. Grand Ave., Artesia, NM 88210 District III 1220 South St. Francis Dr.			30-025-37383	
District III 1000 Rio Brazos Rd., Aztec, NM 87410			STATE X FEE	
District IV 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe	e, NM 87505	6. State Oil & Gas Lease No.	
87505				
(DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPLI	SALS TO DRILL OR TO DEEP	PEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name VACUUM ABO UNIT	
PROPOSALS.) 1. Type of Well: Oil Well	OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505 OTICES AND REPORTS ON WELLS OPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A PPLICATION FOR PERMIT" (FORM C-101) FOR SUCH Gas Well Other OPHILLIPS CO. BOX 2197 WL3 6108 STON, TX 77252 Township 18S Range 35E NMPM 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3945 or Closure Indicate Ty, STATE 6. State Oil & 7. Lease Name VACUUM AB 8. Well Numb 9. OGRID Numb 9. OGRID Numb 10. Pool name VACUUM AB 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3945 or Closure Indicate Ty, STATE 6. State Oil & 7. Lease Name VACUUM AB 7. Lease Name VACUUM AB 8. Well Numb 9. OGRID Numb 10. Pool name VACUUM AB 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3945 or Closure Indicate Ty, STATE 6. State Oil & 7. Lease Name VACUUM AB 7. Lease Name VACUUM AB 7. Lease Name VACUUM AB 9. OGRID Numb 10. Pool name VACUUM AB 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3945 Indicate Ty, STATE 6. State Oil & 7. Lease Name VACUUM AB 7. Lease Name VACUUM AB 9. OGRID Numb 10. Pool name VACUUM AB 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3945 Indicate Ty, STATE 6. State Oil & 7. Lease Name VACUUM AB 7. Lease Name VACUUM AB 7. Lease Name VACUUM AB 9. OGRID Numb 10. Pool name VACUUM AB 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3945 Indicate Ty, STATE 6. State Oil & Theat Completed Operation (Clearly state all pertinent details, and give pertinent details.		8. Well Number 22	
2. Name of Operator			9. OGRID Number 217817	
3. Address of Operator D.O. DO.	CONOCOPHILLIPS CO. Operator P.O. BOX 2197 WL3 6108 HOUSTON, TX 77252 ion Letter E : 2470		10. Pool name or Wildcat	
HOUSTO	Unit Letter E : 2470 feet from the NORTH line and Section 4 Township 18S Range 35E 11. Elevation (Show whether DR, RKB, RT, GR, et 3945 elow-grade Tank Application or Closure DRILL Depth to Groundwater 28' Distance from nearest fresh water well 3000+ per Thickness: 12 mil Below-Grade Tank: Volume bbls; 12. Check Appropriate Box to Indicate Nature of Notice		VACUUM ABO REEF	
4. Well Location				
			feet from the WEST line	
Section 4				
		ether DR, RKB, RT, GR, etc.,		
3945 it or Below-grade Tank Application				
Pit type DRILL Depth to Groundw	ater 28' Distance from near	rest fresh water well <u>3000+</u> Dist	ance from nearest surface water 3000+	
Pit Liner Thickness: 12 mil	Below-Grade Tank: Vol	umebbls; Co	nstruction Material	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
PERFORM REMEDIAL WORK TEMPORARILY ABANDON	PLUG AND ABANDON CHANGE PLANS	REMEDIAL WOR COMMENCE DRI	ALTERING CASING LLING OPNS. P AND A	
OTHER-construct drill nit		M OTHER.		
13. Describe proposed or comp	leted operations. (Clearly ork). SEE RULE 1103. Fo	state all pertinent details, and	give pertinent dates, including estimated date ach wellbore diagram of proposed completion	
or recompletion.		.7	•	
ConocoPhillips proposes to construguidelines.	ct a drill pit for this well as	s per the NMOCD guidelines	. We also anticipate closing as per the	
•				
hereby certify that the information a	above is true and complete closed according to NMOCD gr	to the best of my knowledge aidelines [X], a general permit []	and belief. I further certify that any pit or below- or an (attached) alternative OCD-approved plan	
SIGNATURE Delona	Markette T	ITLE REGULATORY ANAI	LYST DATE 07/21/2005	
Гуре or print name DEBORAH MA	RBERRY /)	-mail address: deborah.marb	erry@conocophilliple;storme No. (832)486-2320	
For State Use Only		URIGINAL SI		
APPROVED BY:	Tuber T	TTLE PAUL F. I		
Conditions of Approval (if any):	11	DETROI ELIM		