Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
District I Energ	y, Minerals and Natural Resources	October 13, 2009 WELL API NO.
1625 N. French Dr., Hobbs, NM 8 (1968) OCD District II	CONSERVATION DIVISION	30-025-40032
District III	1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 8410-	Santa Fe, NM 87505	STATE X FEE 6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM	2	o. State on & das Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name
(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.)		East Vacuum GBSA Unit 3315W
1. Type of Well: Oil Well X Gas Well Other		8. Well Number 507
2. Name of Operator ConocoPhillips Company		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		
	Feet from the <u>north</u> line and <u>216</u> Fownship 17S Range 35E	66 feet from the east line NMPM CountyLea
1	ion (Show whether DR, RKB, RT, GR, etc.,	J
3944'		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
	DABANDON REMEDIAL WOR	
TEMPORARILY ABANDON CHANGE	= 1	_
PULL OR ALTER CASING MULTIPLE DOWNHOLE COMMINGLE	COMPL CASING/CEMEN	ГЈОВ 📙
DOWNTOLE COMMINGLE		
OTHER:	OTHER: Notice of	
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.		
6/11/11 Move Precision 194 to EVGBSA 3315W-507.		
6/12/11 Supud well @ 01:00. Drill from 60'-1605'		
Ran 37 jts 8-5/8" 24# J-55 ST&C csg, Set at 1594' w/13 cents Cmt w/600 sx cl C Lead, 250 sx cl C tail, circ to surface, WOC		
G 15		
Spud Date: 06/12/2011	Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
$\mathcal{R} \cdot \mathcal{N}$		
SIGNATURE D- J-	TITLE Regulatory Specialist	DATE_07/13/2011
Type or print name Brian D Maiorino	F-mail address: brian d majorino	@conocophilips.P&MDNE: (432)688-6913
For State Use Only	D-man address. Orian.d.maiorino	(432)000-0713
ADDROVED DV:	TITLE PROJECT CHECKER	A DATE UL 15 2011
APPROVED BY:(nany):	IIILE	DATE