

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

Form C-103

May 27, 2004

<p>WELL API NO. 30-025-03063</p>	
<p>5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/></p>	
<p>6. State Oil & Gas Lease No. E-6504</p>	
<p>7. Lease Name or Unit Agreement Name Vacuum Abo Unit Battery 1, Tract 14</p>	
<p>8. Well Number #1</p>	
<p>9. OGRID Number 217817</p>	
<p>10. Pool name or Wildcat Vacuum; Abo Reef</p>	
<p>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 PROPOSALS.)</p>	
<p>1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/></p>	
<p>2. Name of Operator ConocoPhillips Company</p>	
<p>3. Address of Operator 4001 Penbrook Street Odessa, TX 79762</p>	
<p>4. Well Location Unit Letter <u>K</u> : 1980 feet from the <u>South</u> line and 1980 feet from the <u>West</u> line Section <u>5</u> Township <u>18-S</u> Range <u>35-E</u> NMPM County <u>Lea</u></p>	
<p>11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3958' GR</p>	
<p>Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/></p>	
<p>Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____</p>	
<p>Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____</p>	

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 OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: ☐

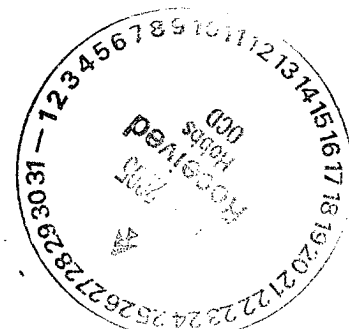
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

This well is presently shut-in.

It is proposed to re-enter the well, perforate additional pay, stimulate, purchase new rod & pumping equipment and bring the well back on to production.

*

After remedial work has been done. Form C-104 is required with 24 hour production test to put this well back on production.



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 Celeste G. Dale TITLE Regulatory Analyst DATE 04/25/2005

Type or print name Celeste G. Dale

E-mail address: celeste.g.dale@conocophillips.com Telephone No. (432)368-1667

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OCD DISTRICT SUPERVISOR/GENERAL MANAGER

APPROVED BY: Chris Williams TITLE _____ DATE APR 28 2005

Conditions of Approval (if any):