Submit 3 Copies To Appropriate District Office District I	State of New Mexico Energy, Minerals and Natural Resources				Form C-103 Revised June 10, 2003		
1625 N. French Dr., Hobbs, NM 88240				WELL AI	WELL API NO. 30-025-32665		
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION			5 Indicat	5. Indicate Type of Lease		
District III 1000 Rio Brazos Rd., Aztec, NM 87410  1220 South St. Francis Dr.					STATE X FEE		
District IV Santa Fe, NM 87505 1220 S. St. Francis Dr., Santa Fe, NM				6. State C	6. State Oil & Gas Lease No.		
87505				B-2863-2			
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.)				7. Lease l East Vacu Tract 337	7. Lease Name or Unit Agreement Name East Vacuum GB/SA Unit Tract 3374		
1. Type of Well: Oil Well Gas Well Other Water Injection Well				8. Well N	8. Well Number 387		
Name of Operator     ConocoPhillips Company				9. OGRII	9. OGRID Number 217817		
3. Address of Operator 4001 Penbrook Street Odessa, TX 79762					10. Pool name or Wildcat Vacuum Grayburg/San Andres		
4. Well Location							
Unit Letter L :	feet from the	South	line and _	508	feet from the West	_line	
Section 33	Township 17	S R	ange 35E	NMPM	County Lea		
11. Elevation (Show whether DR, RKB, RT, GR, et				etc.)			
12 Check	Appropriate Box to In	ndicate N	lature of Notice	Papart or	Other Date		
NOTICE OF IN		idicale iv			Γ REPORT OF:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	ι 🗆	REMEDIAL WO		☐ ALTERING CASING	G □	
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DI		S. PLUG AND ABANDONMENT		
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING TEST A CEMENT JOB	AND			
OTHER:			OTHER: Well In	itegrity Test		X	
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							
8/15/05 RUN MIT, COPY OF CHART ATTACHED.							
8/15/05 RUN MIT, COPY OF CHART ATTACHED.							
			100	773.54.2626			
					,		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.							
SIGNATURE Hay Ho	mas	TITLE_R	egulatory Assistar Gay Thom	nt as@conocoph	DATE 08/15/200	05	
Type or print name Gay Thomas		E-mail ad			Telephone No. (432)3	68-1217	
(This space for State use)	111	. gryste Britis	raed by		AUG 1 9 2005		
APPPROVED BY Conditions of approval, if any.	· WIND GARY	LITTE	IK	STAFF MANA	GER DATE 9 2005		
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