

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 87240
District II
811 South First, Artesia, NM 87210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-103
Revised March 25, 1999

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.)	
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	WELL API NO. 30-025-23386
2. Name of Operator ConocoPhillips Company	5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
3. Address of Operator 4001 Penbrook Street Odessa, TX 79762	6. State Oil & Gas Lease No. 31172
4. Well Location Unit Letter J : 1650 feet from the SOUTH line and 2310 feet from the EAST line Section 22 Township 17-S Range 35-E NMPM County LEA	7. Lease Name or Unit Agreement Name: EAST VACUUM GB/SA UNIT TRACT 2270
8. Well No. 001	
9. Pool name or Wildcat VACUUM GRAYBURG/SAN ANDRES	
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3941' GR	

11. 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 COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

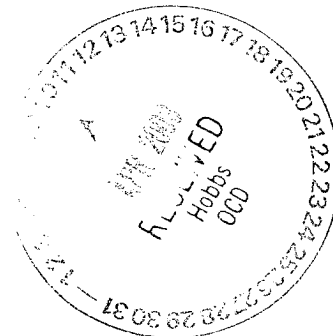
REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐

OTHER: **Ran Integrity Test & TA Well** ☒

12. 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 recompilation.

3/19/03 Ran test @520 psi for 30 min, test ok. Request OCD for approval of TA status for 5 years.

This Approval of Temporary
Abandonment Expires 4/18/08



I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Alva Franco TITLE Regulatory Assistant DATE 4/09/03

Type or print name **Alva Franco**

Telephone No. **915/368-1665**

(This space for State use)

APPROVED BY Gary W. Wink TITLE FIELD REPRESENTATIVE II/STAFF MANAGER DATE APR 11 2003
Conditions of approval, if any:

