Submit 3 Copies To Appropriate District Office State of New Mexico Energy, Minerals and Natural Resources	Form C-103 Revised March 25, 1999
District I 1625 N. French Dr., Hobbs, NM 87240	WELL API NO.
District II OII CONSERVATION DIVISION	30-025-02887
811 South First, Artesia, NM 87210 District III  2040 South Pacheco	5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV	STATE x FEE
2040 South Pacheco, Santa Fe, NM 87505	6. State Oil & Gas Lease No. 31172
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	7. Lease Name or Unit Agreement Name:
PROPOSALS.)	EAST VACUUM GB/SA UNIT
1. Type of Well: Oil Well X Gas Well Other	TRACT 2672
2. Name of Operator	8. Well No.
ConocoPhillips Company	004
3. Address of Operator	9. Pool name or Wildcat
4001 Penbrook Street, Odessa, TX 79762 4. Well Location	VACUUM GRAYBURG/SAN ANDRES
Unit Letter A : 660 feet from the NORTH line and 660 feet from the EAST line	
Section 26 Township 17-S Range 35-E	NMPM County LEA
10. Elevation (Show whether DR, RKB, RT, GR, etc.	
3924' DF, 3924' RKB	
11. Check Appropriate Box to Indicate Nature of Notice,	Report, or Other Data
	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK  PLUG AND ABANDON  REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON	NG OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING  MULTIPLE  CASING TEST AND CEMENT JOB	
OTHER: OTHER: INTEGRITY	TEST & TEMPORARY ABANDONMENT
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.	
03/19/2003 RAN TEST @530# FOR 30 MIN, TEST HELD OK AND LEFT WELL IN A TA STATUS.	
REQUEST OCD FOR APPROVAL OF TA STATUS FOR 5 YEARS.	
273 Ver 3 10 20	
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This Approval of Temporary _/_/	(A)
Abandonment Expires 5/9/08	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	15 05 67 827
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE CHEW MANCO TITLE REGULATORY ASSIS	TANT DATE <u>05/05/2003</u>
Type or print name ALVA FRANCO	Telephone No. 432/368-1665
(This space for State use)  OC FIELD REPRESENTATIVE II/STAFT MANAGER ARAY & 0.0000	
APPROVED BY Law W. Wink TITLE	DATE MAY 0 9 2003
Conditions of approval, if ary:	DATE

