Office Office	State of No		ecources.			ronn Cden a Marchen	
Office Energy, Minerals and Natural Resources District I 1625 N. French Dr., Hobbs, NM 87240				Revised March 25, 1999 WELL API NO.			
District II	OIL CONSERVATION DIVISION				30-025-32368		
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				ST	TATE 🗷	FEE 🗌	
District IV 2040 South Pacheco, Santa Fe, NM 87505				6. State	Oil & Gas Leas -1861	e No.	
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 Name or Unit Agreement Name: VACUUM GLORIETA EAST UNIT (#31257)			
1. Type of Well: Oil Well X Gas Well Other				TRACT 38			
2. Name of Operator				8. Well l	No.		
CONOCOPHILLIPS COMPANY (OGRID #217817)				03			
3. Address of Operator				9. Pool name or Wildcat			
4. Well Location					ELORIETA .		
Unit Letter N :	1130 feet from the	SOUTH	line and	1405	_ feet from the	WEST	_ line
	T 11	- D		ND (D) (_		_
Section 29	Township 17 10. Elevation (Show wh			NMPM	Co	unty LEA	\$\$\$\$\$\$ 1
	10. Elevation (Show wh	3973' GI		<i>c.)</i>			
11. Check A	Appropriate Box to Ind			Report, o	or Other Data	a	
NOTICE OF INT			•	-	NT REPOR		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REM	EDIAL WORK		_	TERING CASIN	IG
TEMPORARILY ABANDON	CHANGE PLANS	СОМ	MENCE DRILLI	NG OPNS		UG AND ANDONMENT	
PULL OR ALTER CASING	MULTIPLE COMPLETION		NG TEST AND ENT JOB			ANDONVILINI	
OTHER:		□ отн	R: ran test	AND TEMP	ORARY ABANDO	N	
12. Describe Proposed or Complete of starting any proposed work). or recompilation.							
3/26/2003 RAN INTEGRITY T	EST @550# FOR 30 MIN.	REQUEST (OCTO FROM TVA ST	ATTES FOR	5 YEARS		
3,20,2003 1411 1111241111 1	DI 6550# TOK 50 IIIV.	ragoasi .	SED FOR IM DI				
					55 TO 10 10 10 10 10 10 10 10 10 10 10 10 10		
					<u>- 51</u>	7 18 10 2	
					01516	1.0 10 20 27	
					25	~ £5.	/
					\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	() o	15.7 15.7
This	Approval of Tempo	rarv	1/ .		100		12
4bano	onment Expires	5/	15/08		10	62002	<u> </u>
	-		-		\co	(, , 0,)	3/ -
					OS A	-69)	/
					<u> </u>	1 16065	
I hereby certify that the information above	is true and complete to the b	est of my kno	wledge and belief	f.			
SIGNATURE (Illus)	nenco	TITLE_ REC	ULATORY ASSI	STANT	DATE	05/05/200	3
Type or print name ALVA FRANCO					Telephone No	o. 432/368-1	665
(This space for State use)	~ ~ \			NIA CED	V	AY 1 5 200	3
APPROVED BY Conditions of approval, if any:	. Wyserield REPR	RESENTATI\ TITLE	'E II/STAFF MA	MAGER	DATE_		

