

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

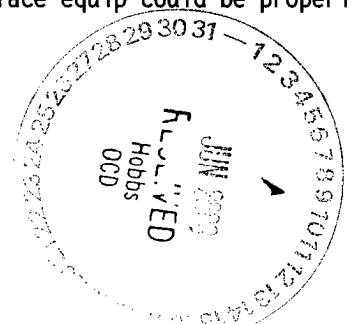
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO. 30-025-34583
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator ConocoPhillips Company		6. State Oil & Gas Lease No.
3. Address of Operator 4001 Penbrook Street Odessa, TX 79762		7. Lease Name or Unit Agreement Name: TOMAHAWK 19 STATE
4. Well Location Unit Letter <u>H</u> : <u>2616</u> feet from the <u>NORTH</u> line and <u>1148</u> feet from the <u>EAST</u> line Section <u>19</u> Township <u>17-S</u> Range <u>34-E</u> NMPM County <u>LEA</u>		8. Well No. 1
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 4092' GR		9. Pool name or Wildcat VACUUM ATOKA-MORROW NORTH (GAS)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: Install Plunger Lift <input checked="" type="checkbox"/>

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 recompletion.

4/10/2003 MIRU Swab unit -RIH w/Swab and tagged fluid @8900' - Made 11 runs and well kicked off - caught plunger and let well unload dropped plunger and put well on plunger controler - (recovered 46 bbls of wtr) - plunger made 1 more trip - shut well in until morning so all the surface equip could be properly set up.

4/11/2003 Set up surface equipment and put plunger lift in operation.



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 5/30/2003

Type or print name Alva Franco Telephone No. 432/368-1665

(This space for State use)

APPROVED BY Gayle W. Wink TITLE OC FIELD REPRESENTATIVE IV/STAFF MANAGER DATE JUN 17 2003

Conditions of approval, if any: