

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised August 1, 2011

HOBBS OCD
 FEB 25 2013

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-025-02921	
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name EAST VACUUM GSA UNIT TRACT 2819	
8. Well Number 002	
9. OGRID Number 217817	
10. Pool name or Wildcat VACUUM; GRAYBURG SAN-ANDRES	
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 type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other INJECTION 2. Name of Operator ConocoPhillips Company 3. Address of Operator p. O. Box 51810 Midland, TX 79710 4. Well Location Unit Letter H : 1980 feet from the NORTH line and 660 feet from the EAST line Section 28 Township 17S Range 35E NMPM County LEA 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3932' GL	

12. 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 COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <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"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: REPORT MIT <input checked="" type="checkbox"/>	
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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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

01/16/2013 Charted MIT @ 520#/30 min- test good. See attached chart.

Spud Date: Rig Release Date:

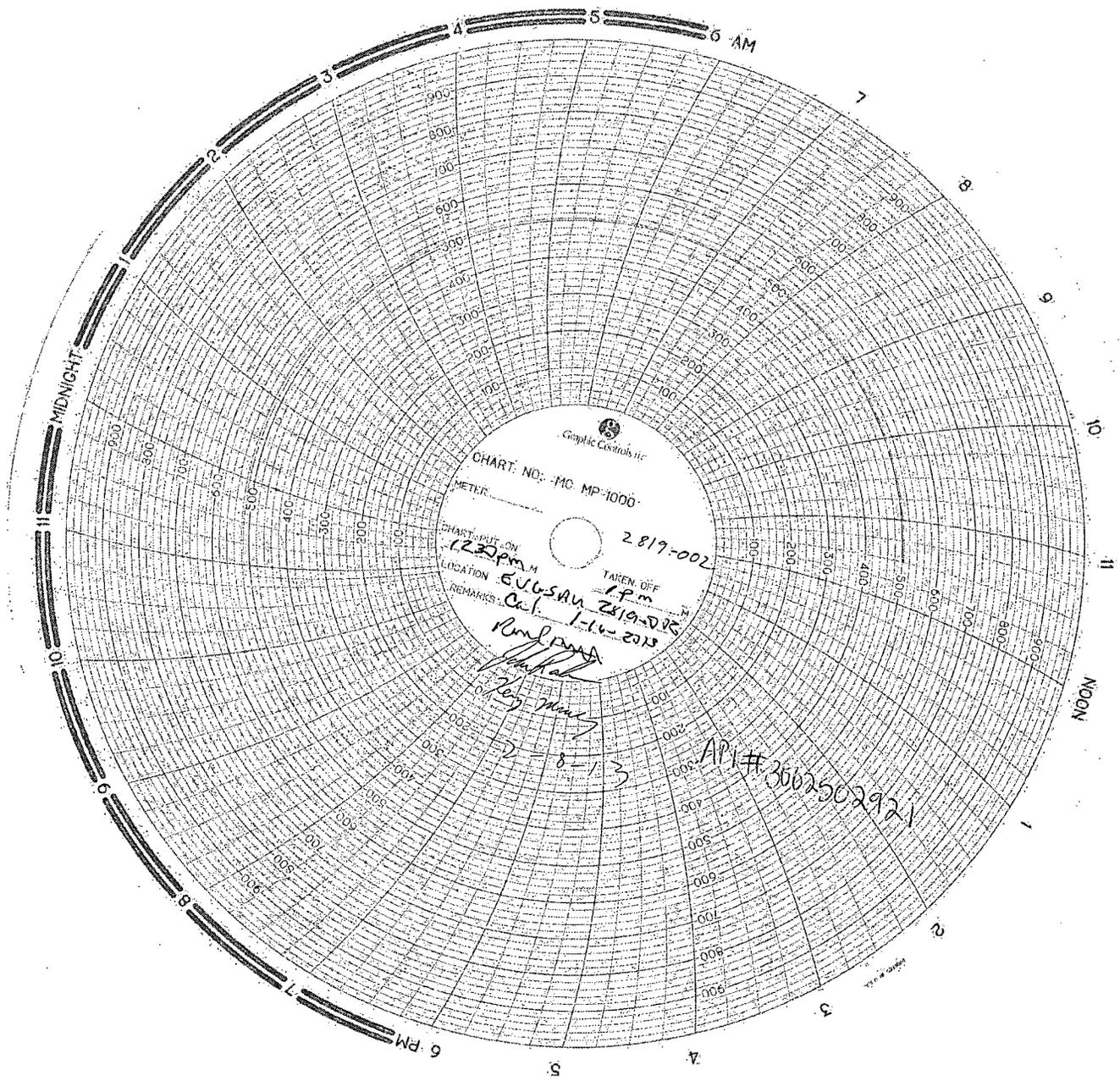
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Ashley Martin TITLE Staff Regulatory Technician DATE 02/22/2013

Type or print name Ashley Martin E-mail address: Ashley.Martin@conocophillips.com PHONE: (432)688-6938

For State Use Only

APPROVED BY: [Signature] TITLE DIST. MGR DATE 2-26-2013
 Conditions of Approval (if any):
 FEB 25 2013



Graphic Controls Inc.

CHART NO.: MC MP-1000

CHART PUT ON: 12:20 PM

2819-002

LOCATION: EUGENIA

TAKEN OFF: 1 PM

REMARKS: Cal. 1-14-2013

Rund PANA

AP # 3002502921

E-8-1-3

MIDNIGHT

6 AM

NOON

6 PM

5

4

3

2

1

NOON

11

10

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8

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400

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100

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