

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  
**HOBBS OCD**  
 OIL CONSERVATION DIVISION  
 FEB 25 2013  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

Form C-103  
 Revised August 1, 2011

WELL API NO. 30-025-26574	
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 2642	
8. Well Number 001W	
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 <input type="checkbox"/> 2. Name of Operator ConocoPhillips Company 3. Address of Operator P. O. Box 51810 Midland, TX 79710 4. Well Location Unit Letter H : 2630 feet from the NORTH line and 1310 feet from the EAST line Section 26 Township 17S Range 35E NMPM County LEA 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3911' GR	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b> 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"/>		<b>SUBSEQUENT REPORT OF:</b> 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: <input type="checkbox"/>		OTHER: REPORT MIT <input checked="" type="checkbox"/>	

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 @ 550#/30min- test good. See attached chart.

Spud Date:

Rig Release Date:

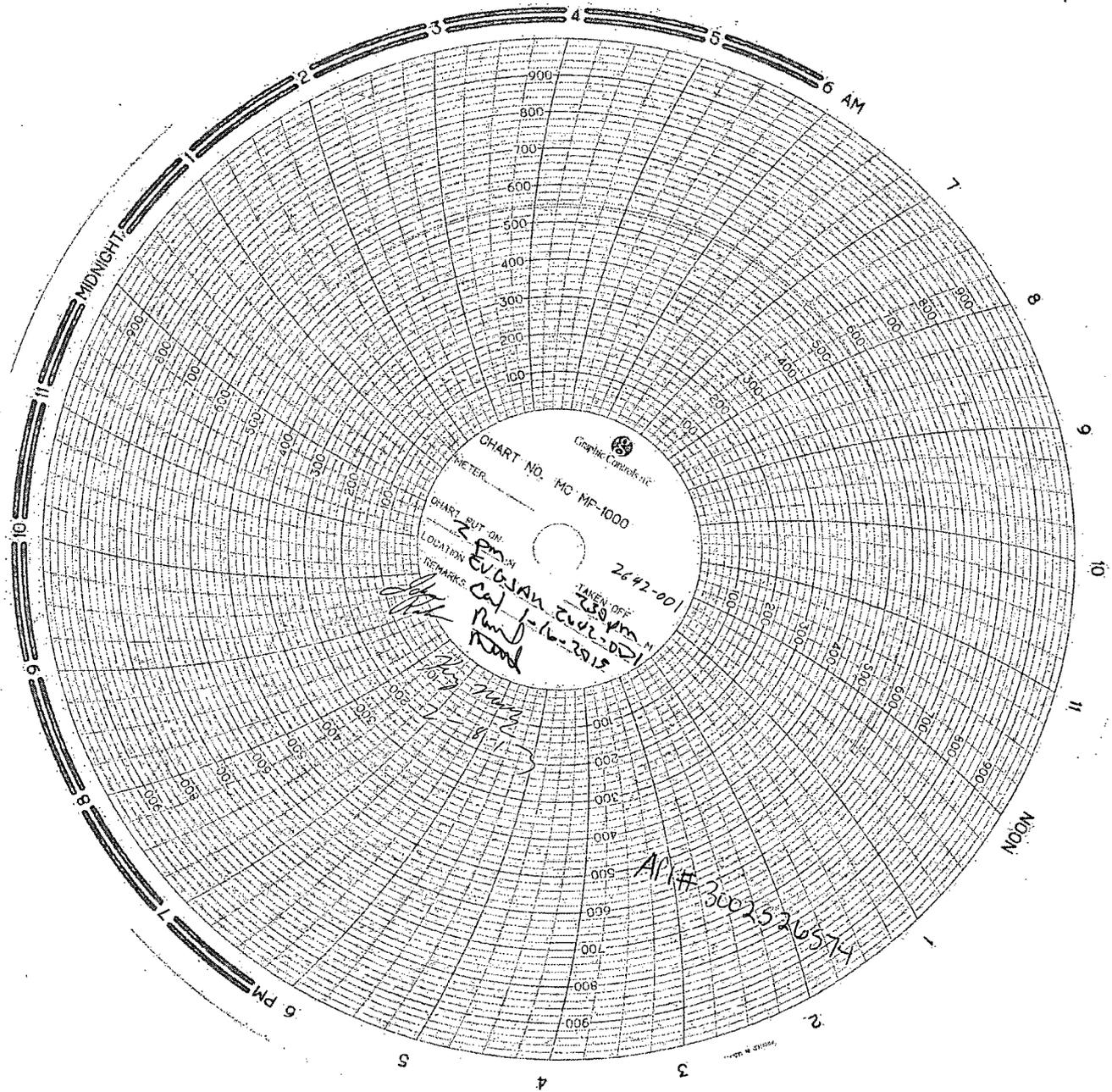
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

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):

FFR 25 2013



Graphic Controls, Inc.

CHART NO. MC MF-1000

BAROMETER

CHART SUT ON

LOCATION

REMARKS

2642-001

TAKEN OFF

2300 PM

EVISAN

CAJ

Rm

Road

2300 PM

EVISAN

CAJ

Rm

Road

AP# 3003526574

MIDNIGHT

6 AM

6 PM

NOON