| Office | te of New Mexico | Form C-103 Revised August 1, 2011 |
|---|-----------------------------------|--|
| <u>District I</u> – (575) 393-6161 Energy, Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 88240 | | WELL API NO. |
| District II - (575) 748-1283 | | 30-025-39657 |
| District III (505) 224 6179 | | 5. Indicate Type of Lease STATE X FEE |
| 1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460 1220 South St. Francis Dr. Santa Fe, NM 87505 FEB 2 5 2013 Santa Fe, NM 87505 | | 6. State Oil & Gas Lease No. |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | |
| 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 EAST VACUUM GSA UNIT TRACT 3315 |
| 1. Type of Well: Oil Well Gas Well X Other INJECTION | | 8. Well Number 503 |
| Name of Operator ConocoPhillips Company | | 9. OGRID Number 217817 |
| 3. Address of Operator P. O. Box 51810 | | 10. Pool name or Wildcat |
| Midland, TX 79710 | | VACUUM; GRAYBURG SAN- ANDRES |
| 4. Well Location Unit Letter J: 1840 feet from the SOUTH line and 2248 feet from the EAST line | | |
| Section 33 Townsl | | NMPM County LEA / |
| | ow whether DR, RKB, RT, GR, etc.) | |
| 3942' GR | | |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | | |
| | | |
| NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABA | | SEQUENT REPORT OF: ← □ ALTERING CASING □ |
| TEMPORARILY ABANDON . CHANGE PLANS | | - |
| PULL OR ALTER CASING MULTIPLE COM | PL ☐ CÀSING/CEMENT | JOB 🗆 |
| DOWNHOLE COMMINGLE | · | • |
| OTHER: | ☐ OTHER: REPORT | MIT |
| 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#/30min-test good. See attached chart. | | |
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| 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 (LAN) LUL () (MLLL) | TITLE Staff Regulatory Technicia | DATE <u>02/22/2013</u> |
| Type or print name Ashley Martin | E-mail address: Ashley.Martin@o | conocophillips.cdHONE: (432)688-6938 |
| For State Use Only | | - |
| APPROVED BY | TITLE DIST ME | DATIZ-26-2013 |
| Conditions of Approval (if any): | 111111 | DAIL 45 CUX |

