

Submit To Appropriate District Office Two Copies District I 1625 N. French Dr., Hobbs, NM 88240 District II 811 S. First St., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505		<b>State of New Mexico</b> <b>Minerals and Natural Resources</b> <b>Conservation Division</b> 1220 South St. Francis Dr. Santa Fe, NM 87505		<b>Form C-105</b> Revised August 1, 2011						
		FEB 13 2011 RECEIVED		1. WELL API NO. <b>30-025-20864</b> 2. Type of Lease <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN 3. State Oil & Gas Lease No. <b>B-1527</b>						
<b>WELL COMPLETION OR RECOMPLETION REPORT AND LOG</b>										
4. Reason for filing: <input type="checkbox"/> <b>COMPLETION REPORT</b> (Fill in boxes #1 through #31 for State and Fee wells only) <input type="checkbox"/> <b>C-144 CLOSURE ATTACHMENT</b> (Fill in boxes #1 through #9, #15 Date Rig Released and #32 and/or #33; attach this and the plat to the C-144 closure report in accordance with 19.15.17.13.K NMAC)				5. Lease Name or Unit Agreement Name <b>Vacuum Glorieta East Unit</b> 6. Well Number: <b>02</b>						
7. Type of Completion: <input type="checkbox"/> NEW WELL <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPENING <input type="checkbox"/> PLUGBACK <input type="checkbox"/> DIFFERENT RESERVOIR <input checked="" type="checkbox"/> <b>OTHER Injection Well</b>				9. OGRID <b>217817</b>						
8. Name of Operator <b>ConocoPhillips Company</b>				11. Pool name or Wildcat <b>Vacuum; Glorieta</b>						
10. Address of Operator <b>P. O. Box 51810 Midland, TX 79710</b>										
12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County
Surface:	I	31	17S	35E		2080	S	660	E	Lea
BH:										
13. Date Spudded 11/05/1964	14. Date T.D. Reached 11/23/1964	15. Date Rig Released 09/22/2010		16. Date Completed (Ready to Produce)		17. Elevations (DF and RKB, RT, GR, etc.) <b>3978' GR</b>				
18. Total Measured Depth of Well 6300'		19. Plug Back Measured Depth 6251'		20. Was Directional Survey Made? NO		21. Type Electric and Other Logs Run on file				
22. Producing Interval(s), of this completion - Top, Bottom, Name										
<b>23. CASING RECORD (Report all strings set in well)</b>										
CASING SIZE		WEIGHT LB./FT.		DEPTH SET		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED
8 5/8"		24#		1572		12 1/4"		900 sx		surf
5 1/2"		9.5#		6298'		7 7/8"		1800 sx		surf
<b>24. LINER RECORD</b>										
SIZE	TOP	BOTTOM	SACKS CEMENT		SCREEN	25. TUBING RECORD				
						SIZE	DEPTH SET	PACKER SET		
						2 3/8"	6040'	6035'		
26. Perforation record (interval, size, and number) re-perf @ 6048'-6076' @ 3spf										
27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.										
DEPTH INTERVAL						AMOUNT AND KIND MATERIAL USED				
6048'-6076'						1500 gals 15% HCL				
28. PRODUCTION										
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)				Well Status (Prod. or Shut-in)				
Date of Test	Hours Tested	Choke Size	Prod'n For Test Period	Oil - Bbl	Gas - MCF	Water - Bbl.	Gas - Oil Ratio			
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API - (Corr.)				
29. Disposition of Gas (Sold, used for fuel, vented, etc.)										30. Test Witnessed By
31. List Attachments										
32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.										
33. If an on-site burial was used at the well, report the exact location of the on-site burial:										
Latitude			Longitude			NAD 1927 1983				
I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief										
Signature		Printed Name Rhonda Rogers			Title Staff Regulatory Technician			Date 02/11/2013		
E-mail Address rogersr@conocophillips.com										

WFX-856

# INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well and not later than 60 days after completion of closure. When submitted as a completion report, this shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, items 11, 12 and 26-31 shall be reported for each zone.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico		Northwestern New Mexico	
T. Anhy	T. Canyon	T. Ojo Alamo	T. Penn A"
T. Salt	T. Strawn	T. Kirtland	T. Penn. "B"
B. Salt	T. Atoka	T. Fruitland	T. Penn. "C"
T. Yates	T. Miss	T. Pictured Cliffs	T. Penn. "D"
T. 7 Rivers	T. Devonian	T. Cliff House	T. Leadville
T. Queen	T. Silurian	T. Menefee	T. Madison
T. Grayburg	T. Montoya	T. Point Lookout	T. Elbert
T. San Andres	T. Simpson	T. Mancos	T. McCracken
T. Glorieta	T. McKee	T. Gallup	T. Ignacio Otzte
T. Paddock	T. Ellenburger	Base Greenhorn	T. Granite
T. Blinbry	T. Gr. Wash	T. Dakota	
T. Tubb	T. Delaware Sand	T. Morrison	
T. Drinkard	T. Bone Springs	T. Todilto	
T. Abo	T.	T. Entrada	
T. Wolfcamp	T.	T. Wingate	
T. Penn	T.	T. Chinle	
T. Cisco (Bough C)	T.	T. Permian	

## OIL OR GAS SANDS OR ZONES

No. 1, from.....to.....

No. 3, from.....to.....

No. 2, from.....to.....

No. 4, from.....to.....

## IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. 1, from.....to.....feet.....

No. 2, from.....to.....feet.....

No. 3, from ..... to ..... feet .....

## LITHOLOGY RECORD (Attach additional sheet if necessary)

From	To	Thickness In Feet	Lithology