Submit 1 Copy To Appropriate District State of New Mexico	Form C-103
Office	Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240 2 9 2013	WELL API NO.
District II - (575) 748-1283 811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION	30-025-34833 5. Indicate Type of Lease
<u>District III</u> - (505) 334-6178 , RECEIVED 1220 South St. Francis Dr.	STATE X FEE
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460 Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fc, NM 87505	MC20353
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	7. Lease Name or Unit Agreement Name East Vacuum Grayburg-San Andres Unit
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other Injection	8. Well Number 396 —
2. 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: 2630 feet from the South line and 195	
Section 31 Township 17S Range 35E	NMPM County Lea
11. Elevation (Show whether DR, RKB, RT, GR, etc.	
3989' RKB	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING	
TEMPORARILY ABANDON	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB	
DOWNHOLE COMMINGLE	
OTHER: OTHER: Report N	MIT 🖫
13. Describe proposed or completed operations. (Clearly state all pertinent details, an	d 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.	
Retested EVGSAU 3127-396W April 3, 2013 - Bled down pressure on surface casing, no fluid observed - Rigged up on production casing w/ pump truck & pressure casing up	
- Casing test passed - test charted @ 495#/ 30 min	
See attached chart.	
,	
Spud Date: Rig Release Date:	
	<u> </u>
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE TITLE Regulatory Consultant DATE 04/09/2013	
Type or print name Ali Savage E-mail address: ali.savage@contractor.conocophiPhtsOber (432)688-6916 For State Use Only	
A DI State Use Only	
APPROVED BY TITLE ST. MEE	DATE 4-29-201
Conditions of Approval (if any):	

