

Submit 3 Copies To, Appropriate District
 Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 1301 W. Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87401
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM
 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 May 27, 2004

HOBBS OCD
 MAY 15 2013

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

WELL API NO. 30-025-20845
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-1576-3
7. Lease Name or Unit Agreement Name Vacuum Glorieta East Unit Tract 19
8. Well Number 2
9. OGRID Number 217817
10. Pool name or Wildcat Vacuum; Glorieta

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 Gas Well Other

2. Name of Operator
ConocoPhillips Company

3. Address of Operator
P.O. Box 51810 Midland, TX 79710

4. Well Location
 Unit Letter **K** : **2310** feet from the **South** line and **2310** feet from the **West** line
 Section **32** Township **17-S** Range **35-E** NMPM **Lea** County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3964' GL

Pit or Below-grade Tank Application or Closure

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water N/A

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	OTHER: <input type="checkbox"/>
OTHER: <input type="checkbox"/>		OTHER: <input 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

5/07/13----Call OCD to notify of move in.

5/07/13----Tbg @ 5810' circ hole w/ 10# MLF. Tbg @ 4900' - spot 20 sxs "C" cmt CAL TOC @ 4800'. Tbg @ 4400' spot 35 sxs "C" cmt - CAL TOC @ 4000' - Tag @ 3891'.

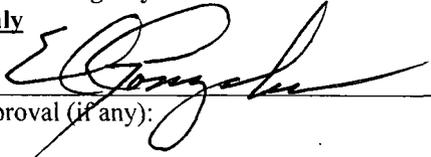
5/08/13----Tbg @ 3670' - spot 20 sxs "C" cmt CAL TOC @ 3500'. Tbg @ 3100' - spot 35 sxs "C" cmt CAL TOC @ 2681' Tag @ 2560'. Perf @ 1600' pkr set @ 1156' sqz 50 sxs "C" cmt CAL TOC @ 1500' Tag @ 1450'.

5/09/13----Perf @ 300' NU well head, pump 95 sxs "C" cmt from 300' to surface out of the 8% csg. NDWH. Fill wellbore. RDMO.

Approved for plugging of well bore only.
 Liability under bond is retained pending receipt of C-103 (Subsequent Report of Well Plugging) which may be found at OCD Web Page under Forms, www.emnrd.state.nm.us/ocd.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan .

SIGNATURE  TITLE **P & A Technician (Basic Energy Services)** DATE **5/13/13**
 Type or print name: **Greg Bryant** E-mail address: _____ Telephone No. **432-563-3355**
For State Use Only

APPROVED BY:  TITLE **DIST. MGR** DATE **5-16-2013**
 Conditions of Approval (if any): _____
 MAY 20 2013