

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 87400
 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

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

HOBBS OCD
 MAY 24 2013

WELL API NO. 30-025-20885
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-1838-1
7. Lease Name or Unit Agreement Name Vacuum Glorieta East Unit Tract 25
8. Well Number 03
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 **E** : **1880** feet from the **North** line and **660** 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.)
3979' RKB 3967' 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

<p>APPROVED FOR PLUGGING AND ABANDON</p> <p>Approved for plugging of well bore only. Liability under bond is retained pending receipt of C-103 (Specifically for Subsequent Report of Well Plugging) which may be found at OCD web page www.emnrd.state.nm.us/oed</p>	<p>REMEDIAL WORK <input type="checkbox"/></p> <p>COMMENCE DRILLING OPNS <input type="checkbox"/></p> <p>CASING/CEMENT JOB <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>	<p>ALTERING CASING <input type="checkbox"/></p> <p>P AND A <input checked="" type="checkbox"/></p>
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13. Describe purpose of starting any proposed or recompletion.
 Date all pertinent details, and give pertinent dates, including estimated date of completion.
 Multiple Completions: Attach wellbore diagram of proposed completion

5/09/13----Call OCD to notify of move in.

5/10/13----Tbg @ 5820' - circ hole w/ 10# MLF. Spot 25 sxs "C" cmt @ 5820' CTOC @ 5445'. Tbg @ 4359' - spot 55 sxs "C" cmt CTOC @ 3550'. Tbg @ 3046' - spot 35 sxs "C" cmt CTOC @ 2652' - Tag @ 2550'.

5/13/13----Tbg @ 1900' - spot 40 sxs "C" cmt w/ 2% CaCl - CTOC @ 1465' - Tag @ 1400'. Perf @ 350' - load hole closed BOP get inj. rate 2BPM w/ 600 psi - well did not circ, call Max B. w/ OCD (ok to sqz 65 sxs "C" cmt @ 350' leave 4 1/2 full of cmt.) NUWH; sqz 65 sxs "C" cmt @ 350' - leave 4 1/2 full of cmt. RDMO.

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 **5/20/13**

Type or print name: **Greg Bryant** E-mail address: _____ Telephone No. **432-563-3355**

APPROVED BY:  TITLE **DIST. MGR** DATE **5-29-2013**
 Conditions of Approval (if any): _____
 MAY 30 2013