	Submit 1 Copy To Appropriate District Office State of New Mexico		Form C-103	
	District 1 – (575) 393-6161 Energy, Minerals and Natural F	al Resources	Revised August 1, 2011 WELL API NO.	
	625 N. French Dr., Hobbs, NM 88240S OCD District II - (575) 748-1283		30-025-20829	
	811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIV	i	5. Indicate Type of Lease	
	District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NMJ87490 2013 1000 Rio Brazos Rd., Aztec, NMJ87490 2013 Santa Fe, NM 87505		STATE X FEE	
	District IV – (505) 476-3460 Santa Fe, NM 87505	5	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.)		B-1399-10	
			7. Lease Name or Unit Agreement Name	
			Vacuum Glorieta East Unit / Tract 05	
	1. Type of Well: Oil Well Gas Well Other Injection Well		8. Well Number ₀₃	
	2. Name of Operator ConocoPhillips Company		9. OGRID Number	
•			217817	
	3. Address of Operatorp. O. Box 51810		10. Pool name or Wildcat	
	Midland, TX 79710		Vacuum; Glorieta	
	4. Well Location	1: 1 1000	first from the Ford	
Unit Letter O: 460 feet from the South line and 1980 feet from the East line				
Section 29 Township 17S Range 35E NMPM County Lea 11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
	11. Elevation (Snow whether DR, KKL	в, к1, GK, евс.)		
			SANCTON STATE OF THE SANCTON S	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF INTENTION TO: SUBSEQUENT REPORT			SEQUENT REPORT OF:	
	PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WOR			
	-		-	
TEMPORARILY ABANDON			JOB	
			cker shall be set within or less than 100	
		feet of the	unnermost injection perfs or open hole.	
OTHER: cased hole CBL for COA to inj 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. WFX-856 MIRU, NUBOP,Load tbg: Release PKR @ 5988'. POOH w/ 2-3/8", 4.7# J-55 IPC tbg w/ OFT & PKR, RU Apollo WL, install lubricator, load well with fresh water if necessary, RIH w/ GR/CBL log. Log from fill @ 6100' to surface. RD Apollo. RIH w/ 2-3/8", 4.7#, J-55 IPC (TK-99) tbg w/:2-3/8" x 5-1/2", 15.5# internal/external nickel-plated PKR w/ pump-out plug 2-3/8" x 5-1/2", 15.5# nickel-plated OFT w/ XN profile (1.875 in. x 1.791 in.) Test tbg below slips @ 3000# while RIH. Set PKR @ approximately 6025' (attempt to position PKR within 100 ft. of uppermost perforation @ 6103').Notify OCD of impending test, chart test annulus @ 500#. Release from OFT. Circ inhibited biocide-treated PKR fluid (2-3/8" x 5-1/2", 15.5# annular volume to PKR:				
			ipletions: Attach wellbore diagram of	
			·	
			OPT (DVD DILA II WII ' . II	
			OF I & PKR, RU Apollo WL, install	
			kel-plated PKR w/ pump-out plug 2-3/8" x	
			s @ 3000# while RIH. Set PKR @	
			6103'). Notify OCD of impending test, chart	
	67.2 bbl; 2-3/8" tbg capacity to PKR: 14.6 bbl).	CR Tiuld (2-3/8"	x 3-1/2", 15.5# annular volume to PKR:	
	Engage OFT, ND BOP. NU well. RD well service unit. Pump out PKR plug, Place well on injection.			
	The Oil Conservation Division		ondition of Approval: notify	
	MITCH THE ACCOUNT		or reperoval. Hottly	
C 15 Prior to 4b 1			OCD Hobbs office 24 hours	
	prio		r of running MIT Test & Chart	
		S		
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
and serving that the information above is true and complete to the best of my knowledge and benefit.				
SIGNATURE DESCRIPTION TITLE Staff Regulatory Technician DATE 07/23/2011			DATE <u>07/23/2013</u>	
Type or print name Rhonda Rogers E-mail address: rogerrs@conocophillips.com PHONE: (432)688-9174				
For State Use Only				
	APPROVED BY:	1000	DAT 7-31-2013 01	
		prost	Operator shall give the OCD efore running the MIT test and chart.	
CONDITION OF APPROVAL: Notify OCD DISTRICT OF ICE 24 HOURS prior to STARTING THE WORKOVER. CONDITION OF APPROVAL: Operator shall give the OCD				
, District Office 24 hour notice before running the MIT test and chart.				
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