Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
District I – (575) 393-6161 End 1625 N. French Dr., Hobbs, NM 88240	ergy, Minerals and Natural Resources	Revised August 1, 2011 WELL API NO.
District II (575) 748 1283	IL CONSERVATION DIVISION	30-025-42071
<u>District III</u> – (505) 334-6178	1220 South St. Francis Dr.	5. Indicate Type of Lease 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 Fe, NM 87505		
SUNDRY NOTICES AN (DO NOT USE THIS FORM FOR PROPOSALS TO D DIFFERENT RESERVOIR. USE "APPLICATION FO		7. Lease Name or Unit Agreement Name Vacuum Abo Unit
PROPOSALS.)  1. Type of Well: Oil Well X Gas Wel  2. Name of Operator	1 Other HOBBSOCD	8. Well Number DU
2. Name of Operator ConocoPhillips Compa	any /	9. OGRID Number 217817
3. Address of Operator P. O. Box 51810 Midland, TX 79710	FED V V LOW	10. Pool name or Wildcat Vacuum;Abo Reef
4. Well Location	RECEIVED	······································
Unit Letter O : 1016	feet from the <u></u> line and <u>23</u>	
Section 27	Township 17S Range 35E vation (Show whether DR, RKB, RT, GR, etc	NMPM County Lea
11. Ele 3930.8	•	<i>c.)</i>
12. Check Appropri	iate Box to Indicate Nature of Notice	e, Report or Other Data
NOTICE OF INTENTION		BSEQUENT REPORT OF:
	AND ABANDON	
PULL OR ALTER CASING MULTI		NT JOB
_	_	· · · · · · · · · · · · · · · · · · ·
OTHER: Name Change	Tations (Clearly state all pertinent details a	nd give pertinent dates, including estimated date
	RULE 19.15.7.14 NMAC. For Multiple C	
ConocoPhillips Company would like to chan number is in line with ConocoPhillips num Attached is a C-102 w/new name.	ange the name of the Vacuum Abo Unit 706 ber sequence.	to the Vacuum Abo Unit 006 so that the
	Denie	
	ALD BANK	
	SAME	ATZ @ STATE. NM; US ANOTHER WELL WITH PRUPERTY + WELL #
	······	
Spud Date:	Rig Release Date:	
-	, <b></b>	
I hereby certify that the information above is t	we and complete to the best of my knowled	las and halisf
Thereby certify that the information above is t	The and complete to the best of my knowled	ige and bener.
SIGNATURE Thomas and	TITLE Staff Regulatory Technic	cianDATE_02/05/2015
Type or print name <u>Rhonda Rogers</u>	E-mail address: rogerrs@conoc	ophillips.com PHONE: (432)688-9174
APPROVED BY: Conditions of Approval (if any):	C TITLE	DATE
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1025 N. French Dr., Hobbs, NM 88240           Phone: (575) 393-6161 Fax: (575) 393-0720           District II           811 S. First St., Artesia, NM 88210           Phone: (575) 748-1283 Fax: (575) 748-9720           District III           1000 Rio Brazos Road, Aztec, NM 87410           Phone: (505) 334-6178 Fax: (505) 334-6170           District IV			als & Na DNSER& 20 South	New Mexico Vatural Resources Department VATION DIVISION HOBBSOCD h St. Francis Dr. e, NM 87505 FEB 0 6 2015			it one copy t E	Form C-102 ugust 1, 2011 o appropriate District Office ED REPORT			
	1220 S. St. Francis Dr., Santa Fe, NM 87505 Phone: (505) 476-3460 Fax: (505) 476-3462						$\supset$				
		W.	ELL LO	CATION	N AND A	ACRE	AGE DEDICA	TIONPLAT			
API Number		er		<sup>2</sup> Pool Code	<sup>3</sup> Pool Name						
30-025-42071			6178	0		Vacuum; Abo Reef					
<sup>4</sup> Property	operty Code 5 Property Name				T	<sup>6</sup> Well Nu	mber				
31158		Vacuum A	ım Abo Unit				006				
<sup>7</sup> OGRID	No.	<sup>8</sup> Operator Name				<sup>9</sup> Elevation		tion			
217817		ConocoPl	Phillips Company				3930.8'				
<u></u>					" Surfa	ace Lo	ocation	······································	_		
UL or lot no.	Section	Township	Range	Lot Idn	Feet fro	m the	North/South line	Feet from the	East/W	est line	County

<b>O</b> <sup>1</sup>	27	175	35E		1016	South	2333	East	Lea
"Bottom Hole Location If Different From Surface									
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
0	27	175	35E		992	South	1404	East	Lea
<sup>12</sup> Dedicated Acres	<sup>13</sup> Joint o	r Infill	<sup>14</sup> Consolidation	Code 15 Or	der No.				
40		ĺ							

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

16				"OPERATOR CERTIFICATION
				I hereby certify that the information contained herein is true and complete
				to the best of my knowledge and belief, and that this organization either
				owns a working interest or unleased mineral interest in the land including
				the proposed bottom hole location or has a right to drill this well at this
x.				location pursuant to a contract with an owner of such a mineral or working
				interest, or to a voluntary pooling agreement or a compulsory pooling
				order peretofore entered by the division.
			(	Cha Di La La Davia da la da
				Signature Date
				.0
	F	hamiad		Rhonda Rogers
		denied		Printed Name
				rogerrs@conocophillips.com
		*18*		E-mail Address
				<b>*SURVEYOR CERTIFICATION</b>
				I hereby certify that the well location shown on this
				plat was plotted from field notes of actual surveys
				made by me or under my supervision, and that the
			-	same is true and correct to the best of my belief.
				same is true and correct to the best of my beneg.
		1 2 1 2 1		Date of Survey
		2333'	-	Signature and Seal of Professional Surveyor:
		SL <del>(222)</del> BH	+ 1404'	
		Ľ۴	F 1707	
	-	-	-	
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		-		Certificate Number
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