| Submit 1 Copy To Appropriate District Office | State of New Mexico Energy, Minerals and Natural Resources | | | Form C-103 |
|---|--|------------------------|---|--|
| <u>District I</u> – (5/75′) 393-6161 Energy, Minerals and 1625 N. French Dr., Hobbs, NM 88240 | | iturai Resources | WELL API | Revised August 1, 2011 |
| <u>District II</u> – (575) 748-1283 | OIL CONSERVATION DIVISION | | | 30-025-03052 / |
| 811 S. First St., Artesia, NM 88210 <u>District III</u> – (505) 334-6178 | 1220 South St. Francis Dr. | | | Type of Lease |
| 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460 | Santa Fe, NM 87505 | | STAT | E X FEE |
| 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | | o. State on | a dus Leuse 110. |
| SUNDRY NOTICES AND REPORTS ON WELLS | | | 7. Lease Name or Unit Agreement Name Vacuum Abo Unit Tract 13 | |
| (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 Injection Well OBBS OCD | | | 8. Well Number 015 | |
| 2. Name of Operator | | | 9. OGRID Number | |
| 3. Address of Operator P. O. Box 5 | | APR 2 7 2015 | 10. Pool nan | 217817 ne or Wildcat |
| Midland, TX 79710 | | | Vacuum; Abo | |
| 4. Well Location | | RECEIVED | | ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, |
| Unit Letter L: 2310 feet from the South line and 660 | | | fee | et from the West line |
| Section 4 | Township 18S | NMPM | County Lea | |
| | 11. Elevation (Show whether D | OR, RKB, RT, GR, etc., |) | |
| | <u> </u> | tra comment | L. | , , , , , , , , , , , , , , , , , , , |
| 12. Check A | appropriate Box to Indicate | Nature of Notice, | Report or O | ther Data |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: | | | | |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING | | | | |
| TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A | | | | |
| PULL OR ALTER CASING | | | | |
| DOWNHOLE COMMINGLE | | | | |
| OTHER: | | OTHER: 5 year M | IIT | |
| 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. | | | | |
| ConocoPhillips Company conducted the 5 year MIT on 4/14/15 to 620#/32 mins- test good. Chart attached | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | • | | |
| | | | | |
| · · | | | | |
| | | | · | |
| | | | | |
| 3 15 | D' D 1 | , | | |
| Spud Date: | Rig Release | Date: | | • |
| | | | | |
| I hereby certify that the information | above is true and complete to the | best of my knowledg | e and belief. | · · · · · · · · · · · · · · · · · · · |
| | (| | | |
| SIGNATURE Thonk | TITLE Staff | f Regulatory Technicia | an | DATE <u>04/23/2015</u> |
| Type or print name Rhonda Rogers | F-mail addr | ess: rogerrs@conoco | nhillins com | PHONE: (432)688-9174 |
| For State Use Only | E man addit | | p | |

APPROVED BY: Sulphy: Conditions of Approval (if any):

TITLE Staff Manage DATE 5/6/2015 Mr

