Submit I Copy To Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources		Form C-103 Revised August 1, 2011
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, winicials and Natural Resources		WELL API NO.
<u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION		30-025-26399
<u>District III</u> – (505) 334-6178	1220 South St. Francis Dr.		5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505		STATE X FEE
1220 S. St. Francis Dr., Santa Fe, NM	34	0,000	
87505	ICEC AND DEPORTS ON WELL	- G	B-1576-3
(DO NOT USE THIS FORM FOR PROPODIFFERENT RESERVOIR. USE "APPLIED OF THE PROPORTION O	CATION FOR PERMIT" (FORM C-101)	PLUG BACK TO A FOR SUCH	7. Lease Name or Unit Agreement Name East Vacum GB-SA Unit Tract 3229
PROPOSALS.) 1. Type of Well: Oil Well	Gas Well Other Injection W	Vell HOBBS OCD	8. Well Number 006
2. Name of Operator ConocoPhilli		APR 2 1 2015	O OCHUDAT I
3. Address of Operator P. O. Box 5	· ·	APR X I Z	10. Pool name or Wildcat
Midland, T	X 79710	18D	Vacuum: GB-SA
4. Well Location		RECEIVED	·
Unit Letter L : 2630 feet from the South line and 1088 feet from the West line			
Section 32		Range 35E	NMPM County lea
	11. Elevation (Show whether D		
	3966' GR		H.
12. Cheek Ammonisto Day to Indicate Notine of Notice Depart on Other Date			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF IN PERFORM REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING	ITENTION TO: PLUG AND ABANDON CHANGE PLANS MULTIPLE COMPL	REMEDIAL WORK COMMENCE DRI	LLING OPNS. P AND A
DOWNHOLE COMMINGLE	_		_
OTHER:		OTHER:	
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 ran 5 year MIT on 2/11/15 to 600#/32 mins -test good.			
Chart Attached			
N.			

Spud Date:	Rig Release l	Date:	
Spud Date.	Nig Kelease i	Date.	;
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
A CO			
SIGNATURE Thornes	TITLE Staff	Regulatory Technicia	DATE 04/02/2015
Type or print name Rhonda Rogers	U F-mail addre	ess: rogerrs@conocor	phillips.com PHONE: (432)688-9174
For State Use Only	E-man addit	and togethatteenoon	7111014U. (432)000-2114
APPROVED BY: Bul	2manah TITLE	Staff Manage	DATE 5/4/2015
Conditions of Approval (if any):	muram HILE	JIME MIANOGE	DATE 5/4/2015

MAY 0 8 2015

