Submit 1 Copy To Appropriate District Office	State of New Mexico		Form C-103
District I – (575) 393-6161	Energy, Minerals and Natural Resources		Revised August 1, 2011
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283			WELL API NO. 30-025-26525
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type of Lease
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE X FEE
<u>District IV</u> – (505) 476-3460	Santa Fe, NM 87	7505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505			B-2273-2
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			7. Lease Name or Unit Agreement Name East Vacuum GB-SA Unit Tract 3456
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other Injection Well OBBS OCD			8. Well Number 007
Name of Operator ConocoPhilli	ns Company	- + 2015	9. OGRID Number
2 Address of Operator	ps Company -	APR 21 2015	217817
3. Address of Operator P. O. Box Midland, T	51810		
4. Well Location	7. 7.7.10	RECEIVED	Vacuum; GB-SA
Unit Letter E : 2500 feet from the North line and 1200 feet from the West line			
-		ange 35E	NMPM County Lea
Section 34	11. Elevation (Show whether DR		
	3942' GR	, KKD, KI, OK, etc.	
	3) 12 GR		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF IN		0.10	OF OUT DEDOOT OF
	ITENTION TO:	L .	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK TEMPORARILY ABANDON	PLUG AND ABANDON CHANGE PLANS	REMEDIAL WOR	
TEMPORARILY ABANDON L	CHANGE PLANS MULTIPLE COMPL	CASING/CEMEN	
DOWNHOLE COMMINGLE	MIDE THE COMME	CASING/CEIVIEN	1 300
OTHER: OTHER: 5 year MIT			
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 has conducted the 5 year MIT on 2/13/15 to 580#/32 mins - test good chart attached			
			:
	D: D1 D		
Spud Date:	Rig Release Da	ate:	
L		<u> </u>	Annua
Lhereby certify that the information	above is true and complete to the h	est of my knowledg	e and belief
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
(Ah, OA)			
SIGNATURE MONULACION TITLE Staff Regulatory Technician DATE 04/06/2015			
Tuna ar print nama Bharda Bassara	E mail address	c: rogerro@conoco	phillips.com PHONE: (432)688-9174
Type or print name Rhonda Rogers E-mail address: rogerrs@conocophillips.com PHONE: (432)688-9174 For State Use Only			
<i>(</i>)			
APPROVED BY: /Silf &	ormanch TITLE	Staff War	sager DATE 5/6/2015
Conditions of Approval (if any):			•

MAY 0 8 2015

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