| Submit 1 Copy To Appropriate District Office   | ffice strict I – (575) 393-6161 Energy, Minerals and Natural Resources  25 N. French Dr., Hobbs, NM 88240 strict II – (575) 748-1283 1 S. First St., Artesia, NM 88210  OIL CONSERVATION DIVISION |                     | Form C-103                               |
|--|---|---------------------|--|
|  |   |                     | Revised August 1, 2011 WELL API NO.      |
| <u>District iI</u> – (575) 748-1283  |   |                     | 30-025-20527                             |
| 811 S. First St., Artesia, NM 88210<br><u>District III</u> – (505) 334-6178  |   |                     | 5. Indicate Type of Lease                |
| 1000 Rio Brazos Rd., Aztec, NM 87410<br>District IV – (505) 476-3460   | Rio Brazos Rd., Aztec, NM 87410   |                     | STATE X FEE 6. State Oil & Gas Lease No. |
| 1220 S. St. Francis Dr., Santa Fe, NM  |   | B-1497              |  |
| SUNDRY NOTICES AND REPORTS ON WELLS  |   |                     | 7. Lease Name or Unit Agreement Name     |
| (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.)  |   |                     | Vacuum Abo Unit<br>Tract 6               |
| 1. Type of Well: Oil Well X Gas Well \ \ Other   |   | 8. Well Number 079  |  |
| Name of Operator     ConocoPhillips Compar   | 1y _ <b>JU</b>  | 2 3 2015            | 9. OGRID Number 217817                   |
| 3. Address of Operator P. O. Box 51810   |   |                     | 10. Pool name or Wildcat                 |
| Midland, TX 79710  | <u> </u>  | RECEIVED            | Vacuum; Abo Reef                         |
| 4. Well Location   |   |                     |  |
| Unit Letter E : 2311   | _feet from the North  | line and <u>992</u> |  |
| Section 26   |   | inge 35E            | NMPM County Lea                          |
| 3957' k  | vation <i>(Show whether DR,</i><br>CR   | KKB, KI, GK, etc.   |  |
|  |   |                     |  |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data   |   |                     |  |
| E-PERMITTING <swd injection=""> SUBSEQUENT REPORT OF:</swd>  |   |                     |  |
| E-PERMITTING <swdinji<br>CONVERSION RBDMS</swdinji<br>   |   | REMEDIAL WOR        |  |
| RETURN TO TA COMMENCE DRILLING OPNS. P AND A   |   |                     |  |
| CSNG ENVIRO CHG LOC CASING/CEMENT JOB  |   |                     |  |
| INT TO PA P&A NR P&A R   |   |                     |  |
| OTHER.   |   | OTHER: work per     | rfomed to place in TA Status w/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 places this well in TA Status   |   |                     |  |
| 7/9/15 RIH w/CIBP & set @ 8205' test to 500#/ held, circ pkr fluid. 7/17/15 Charted MIT to 540#/35 mins - test good. Chart attached.   |   |                     |  |
| // 1// 15 Charted 1/11 to 540//55 mms - test good. Chart attached.   |   |                     |  |
| This Approval of Temporary   |   |                     |  |
| Abandonment Expires 7/17/2619  |   |                     |  |
|  |   |                     |  |
|  |   |                     |  |
|  |   |                     | •  |
|  |   |                     |  |
|  |   |                     | · · · · · · · · · · · · · · · · · · ·    |
| Spud Date:   | Rig Release Da  | ite:                |  |
|  |   |                     |  |
| I haraby cartify that the information above is to  | wa and complete to the he   | est of my knowledge | re and helief                            |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief.   |   |                     |  |
| SIGNATURE Staff Regulatory Technician DATE 07/21/2015  |   |                     |  |
|  |   |                     |  |
| Type or print name Rhonda Rogers E-mail address: rogerrs@conocophillips.com PHONE: (432)688-9174  For State Use Only   |   |                     |  |
| R an   | -   |                     | h  |
| APPROVED BY: Soman   | oh TITLE SI   | Lff Mana            | DATE 8/7/2013-                           |
| Conditions of Approval (if any):   |   |                     |  |
|  |   | AU                  | G 1 4 2015                               |

