Submit 3 Copies To Appropriate District Office	State of New Mexico			Form C-103 Revised March 25, 1999	
District I Energy, Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 87240			WELL API NO.	30-025-26389	
District II 811 South First, Artesia, NM 87210 OIL CONSERVATION DIVISION District III 2040 South Pacheco			5. Indicate Type		
1000 Rio Brazos Rd., Aztec, NM 87410				STATE [X FEE .
District IV Santa Fe, NM 87505 2040 South Pacheco, Santa Fe, NM 87505				6. State Oil & C B-1400-3	Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A					r Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well:				East Vacuum GB/SA Unit Tract 3315	
Oil Well Gas Well OtherWater Injection					
2. Name of Operator ConocoPhillips Company				8. Well No. 000	6
3. Address of Operator 4001 Penbrook St. Odessa TX 79762				9. Pool name or Wildcat Vacuum Grayburg/San Andres	
4. Well Location					
Unit Letter J 2630 feet from the South line and 1334 feet from the East line					
Section 33	Township 17-	S Ra	ange 35-E	NMPM	County Lea
	10. Elevation (Show what 3940.2 GF	hether DR,	RKB, RT, GR, etc.)		
11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data					
NOTICE OF INTENTION TO: SUB				SEQUENT RE	
PERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL WOR	К 🗆	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRI	LLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING TEST AND CEMENT JOBS		
OTHER:				d Chart by NMOCE	
12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work). SEE RULE 1103. For Multiple Completions: Attach diagram of proposed completion or recompletion.					
6/23/03 Per request by Gary Wink	, MIT chart attached for re	eview.			
					egi keringi sa
the Approved of Temporary 7/18/08					
		· `	a company		
		e desta			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.					
SIGNATURE (LLUCE)	nemer	_TITLE <u>I</u>	Regulatory Assistan	t	DATE <u>07/16/2003</u>
Type or print name Alva Franco				Telej	phone No. (432)368-1665
(This space for State use) APPROVED BY LOW TITLE TITLE TITLE CC FIELD REPRESENTATIVE IL/STAFF MANAGER DATE JUL 2 1 2003					
APPROVED BY Conditions of approval, if any:	William	_TITLE_		THE STANDARD	^{ек} рать JUL 2 1 2003

