

District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Ave., Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM 87505

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO.	30-025-27986
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No. B-4118	
7. Lease Name or Unit Agreement Name LEA	
8. Well Number 28	
9. OGRID Number 217817	
10. Pool name or Wildcat VACUUM GB/SA	

<p>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 PROPOSALS.)</p> <p>1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/></p> <p>2. Name of Operator ConocoPhillips Company</p> <p>3. Address of Operator 4001 Penbrook Street Odessa, TX 79762</p> <p>4. Well Location Unit Letter <u>D</u> : 660 feet from the <u>NORTH</u> line and 660 feet from the <u>WEST</u> line Section <u>19</u> Township 17S Range 34 E NMPM County LEA</p> <p>11. Elevation (Show whether DR, RKB, RT, GR, etc.) 4120.8' GR</p>	
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12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

- PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

- REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: TEST FOR TA ☒

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

WELL TEMPORARILY ABANDONED (ATTACHED MIT RUN). WELL IS BEING EVALUATED FOR POSSIBLE YATES OR QUEEN RECOMPLETION. IF UNECONOMICAL TO RECOMPLETE, WELL WILL BE RECOMMENDED FOR PA

This Approval of Temporary Abandonment Expires 3/30/11

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Gay Thomas TITLE Regulatory Assistant DATE 04/05/2006
Type or print name Gay Thomas E-mail address: Gay.Thomas@conocophillips.com Telephone No. (432)368-1217
(This space for State use)
APPROVED BY Gay W. Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE APR 10 2006
Conditions of approval, if any:

