

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources
 CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 Revised August 1, 2011

HOBBS OGD
OCT 16 2017
RECEIVED

WELL API NO.	30-025-42715
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No. B-1839-1	
7. Lease Name or Unit Agreement Name EAST VACUUM GB-SA UNIT	
8. Well Number	523
9. OGRID Number	217817
10. Pool name or Wildcat VACUUM; GRAYBURG, SAN ANDRES	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3934' GL	

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.)

1. Type of Well: Oil Well Gas Well Other INJECTION WELL

2. Name of Operator
ConocoPhillips Company

3. Address of Operator
P. O. Box 51810
Midland, TX 79710

4. Well Location
 Unit Letter F : 2003 feet from the NORTH line and 1529 feet from the WEST line
 Section 27 Township 17S Range 35E NMPM County LEA

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: COMPLETION SUNDRY <input checked="" type="checkbox"/>	

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.

PT 5 1/2" CSG TO 1000# TEST GOOD.
 8/28/17 RIH & PERF WELL @ 4905'-4860'. ACIDIZE W/45 BBLs 15% NEFE HCL.
 8/29/17 RIH & PERF WELL @ 4855'-4795'. ACIDIZE W/120 BBLs 15% NEFE HCL.
 9/7/17 RIH W/147 JTS 2 3/8", 4.7#, J-55 TBG & SET @ 4746' & SET PKR @ 4752'. NDBOP & NUWH RDMO
 ATTACHED IS A DD SURVEY
 ATTACHED IS THE MIT RAN TO 580#/32 MIN - TEST GOOD
 ATTACHED IS THE BH TEST

Spud Date: Rig Release Date:

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

SIGNATURE Rhonda Rogers TITLE Staff Regulatory Technician DATE 10/11/2017
 Type or print name Rhonda Rogers E-mail address: rogers@conocophillips.com PHONE: (432)688-9174
For State Use Only
 APPROVED BY: Mary Brown TITLE AO/II DATE 10/18/2017
 Conditions of Approval (if any):

MB