

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

Form C-103
 Revised August 1, 2011

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

HOBBSD
 MAR 09 2018
 RECEIVED

<p style="text-align: center;">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 type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other Injection Well</p> <p>2. Name of Operator ConocoPhillips Company</p> <p>3. Address of Operator P. O. Box 51810 Midland, TX 79710</p> <p>4. Well Location Unit Letter N : 200 feet from the South line and 2500 feet from the West line Section 32 Township 17S Range 35E NMPM County Lea</p> <p>11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3960'</p>	<p>WELL API NO. 30-025-26650</p> <p>5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/></p> <p>6. State Oil & Gas Lease No. 8-1576-3</p> <p>7. Lease Name or Unit Agreement Name East Vacuum Grayburg-San Andres Unit</p> <p>8. Well Number 009</p> <p>9. OGRID Number 217817</p> <p>10. Pool name or Wildcat Vacuum; Grayburg-San Andres</p>
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12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>	<p>SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/></p> <p>OTHER: 5 YEAR MIT <input checked="" type="checkbox"/></p>
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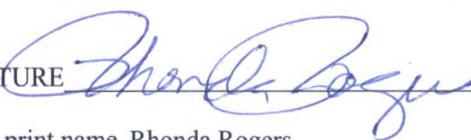
13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

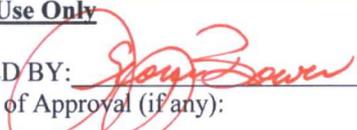
2/19/18 CONOCOPHILLIPS COMPANY CONDUCTED THE 5 YEAR MIT TO 540/32 MIN. CHART ATTACHED

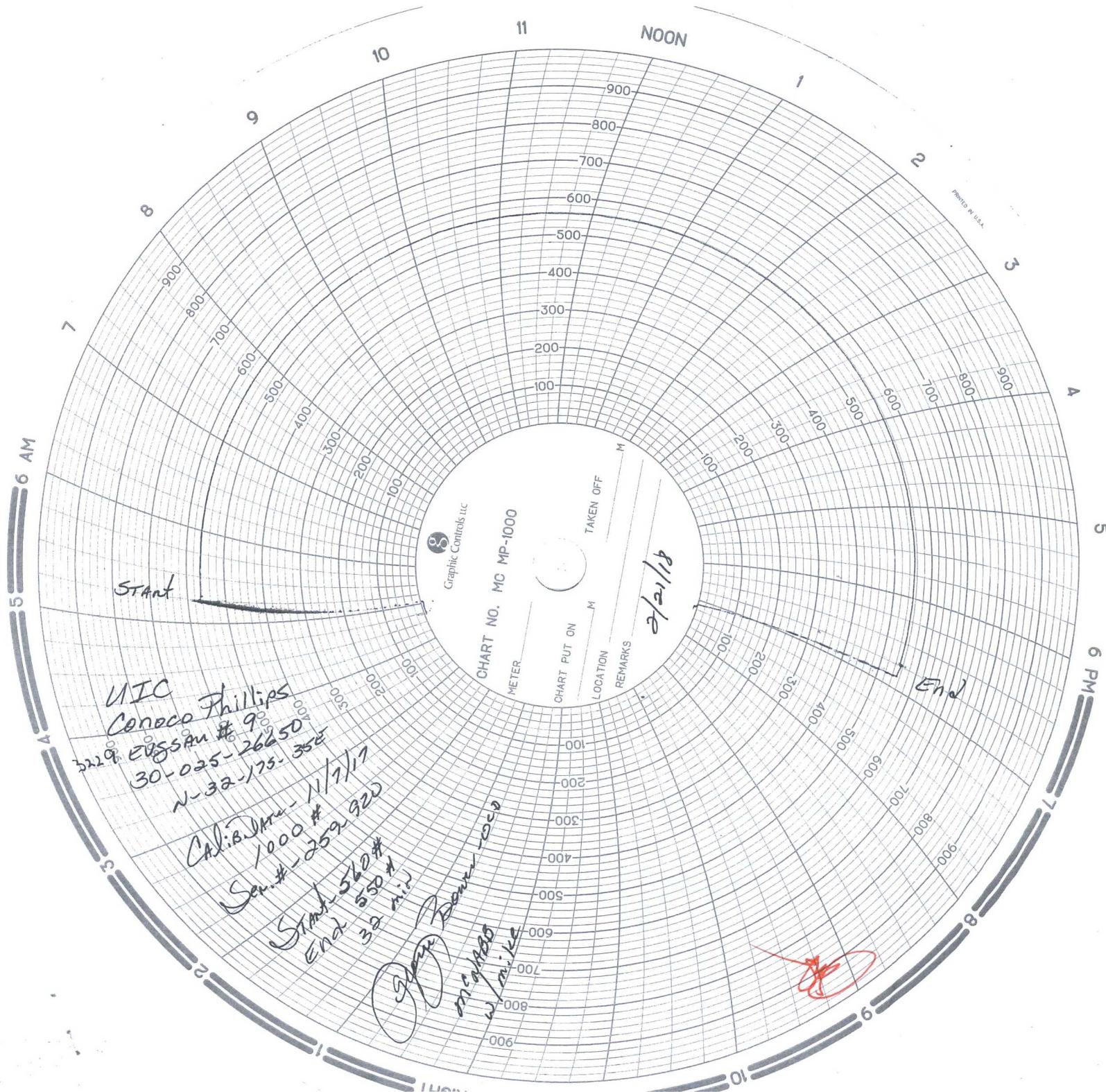
Spud Date:

Rig Release Date:

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

SIGNATURE  TITLE Staff Regulatory Technician DATE 03/07/2018
 Type or print name Rhonda Rogers E-mail address: rogerrs@conocophillips.com PHONE: (432)688-9174

For State Use Only
 APPROVED BY:  TITLE Compliance Officer DATE 3/12/18
 Conditions of Approval (if any):



Graphic Controls Inc
 CHART NO. MC MP-1000
 METER _____
 CHART PUT ON _____
 LOCATION _____
 TAKEN OFF _____
 REMARKS _____
 2/21/8

START

End

UIC
 Conoco Phillips
 3229 Evans # 9
 30-025-26250
 N-32-175-352
 Cal: B. W. - 1/7/17
 1000 #
 Ser. # - 259,920
 Start - 5:20 #
 End - 5:50 #
 32 min

Start
 2/21/8
 W/mike

(Red scribble)