

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

Form C-103
 Revised August 1, 2011

<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 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 P. O. Box 51810 Midland, TX 79710</p> <p>4. Well Location Unit Letter <u>L</u> : 1905 feet from the <u>SOUTH</u> line and <u>1084</u> feet from the <u>WEST</u> line Section <u>33</u> Township <u>17S</u> Range <u>35E</u> NMPM County <u>LEA</u></p> <p>11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3953' GL</p>	<p>WELL API NO. 30-025-42114</p> <p>5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/></p> <p>6. State Oil & Gas Lease No. B-1839-1</p> <p>7. Lease Name or Unit Agreement Name EAST VACUUM GB-SA UNIT</p> <p>8. Well Number <u>518</u></p> <p>9. OGRID Number 217817</p> <p>10. Pool name or Wildcat VACUUM; GB-SA</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: COMPLETION SUNDRY <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.

1/5/18 RIH & PERF F/4710'-4816'. PUMP ACID 106 BBLS 15% NEFE HCL.
 2/20/18 RIH W/145 JTS, 2 7/8", 6.5#, L-80 TBG & SET @ 4692'.
 2/21/18 NDBOP & NUWH. RDMO

GAS CAPTURE PLAN ON NMOCD WEBSITE 4/06/17.
 ATTACHED IS A DD SURVEY
 ATTACHED IS AN "AS DRILLED PLAT"
 ATTACHED IS A CURRENT WELLBORE SCHEMATIC

Spud Date: 10/04/2017

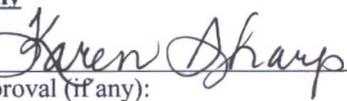
Rig Release Date: 02/21/2018

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 03/20/2018

Type or print name Rhonda Rogers E-mail address: rogerrs@conocophillips.com PHONE: (432)688-9174

For State Use Only

APPROVED BY:  TITLE Staff Mgr DATE 3-30-18
 Conditions of Approval (if any):