

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 July 18, 2013

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

HOBBS OCD
 NOV 25 2019

WELL API NO. 30-025-26995
3. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-1400-3
Lease Name or Unit Agreement Name East Vacuum GB/SA Tr 3315
8. Well Number 007
9. OGRID Number 217817
10. Pool name or Wildcat GB/SA

SUNDRY NOTICES AND REPORTS ON WELLS RECEIVED
 (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

2. Name of Operator
ConocoPhillips Company

3. Address of Operator
P.O. Box 2197 Houston, TX 77252

4. Well Location
 Unit Letter O: 350 feet from the South line and 1500 feet from the East line
 Section 33 Township 17-S Range 35-E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3936' GR

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

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 checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	<i>PAR</i>
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input 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.

10/30/19 - MIRU.

10/31/19 - Cut tbg @ 4420' Ld 2 7/8 tbg, RIH w/ 5 1/2 GR to 4420' RIH set 5 1/2 CIBP @ 405'.

11/01/19 - Tag BP circ well w/ MLF cap BP w/ 75 sxs WOC.

11/04/19 - Tag @ 3686' spot 25 sxs @ 2910' WOC Tag @ 2684', spot 35 sxs @ 1778' WOC.

11/05/19 - Tag @ 1422' PUH to 420' spot 60 sxs to surface verified RDMO.

**A closed-loop system will be used for all fluids from

Approved for Plugging of well bore only. Liability under bond is retained pending restoration and completion of the C-103, Specific for Subsequent Report of well plugging, which may be found on the OCD web page under forms.

Spud Date:

[Empty box for Spud Date]

Rig R#

Restoration Due by: 11-05-20 *7CF*

I hereby certify that the information above is true and complete

SIGNATURE *Chris Romero* TITLE Agent - Basic Energy Services DATE 11/11/19

Type or print name Chris Romero E-mail address: _____ PHONE: 432-563-3355
 For State Use Only

APPROVED BY: *Kenny Foch* TITLE C O A DATE 12-20-19
 Conditions of Approval (if any) _____