Submit 3 Copies To Appropriate District Office	State of New Mexico		Form C-103 Revised June 10, 2003	
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources		WELL API NO.	
District II 1301 W. Grand Ave., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Typ	30-025-20869
<u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE	
District IV	ct IV Santa Fe, NM 8/505		6. State Oil &	Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505			B-2863-2	
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			7. Lease Name or Unit Agreement Name VACUUM GLORIETA EAST UNIT TRACK 3044	
PROPOSALS.)  1. Type of Well:  Oil Well  X  Gas Well   Other			8. Well Number	
Oil Well X Gas Well Other  2. Name of Operator				
ConocoPhillips Company			9. OGRID Number 217817	
3. Address of Operator 4001 Penbrook Street Odessa, TX 79762			10. Pool name or Wildcat VACUUM; GLORIETA	
4. Well Location				
Unit Letter L :	feet from the SOUTH	I line and	990 feet	from the WEST line
Section 33		Range 35-E	NMPM	County LEA
	11. Elevation (Show whether DI 3946'GR	R, RKB, RT, GR, et	tc.)	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF INTENTION TO:			SEQUENT RE	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WOR	KK 🗆	ALTERING CASING $\square$
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DR	ILLING OPNS.	PLUG AND  ABANDONMENT
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AT CEMENT JOB	ND 🗆	ABANDONNENT
OTHER:	П	OTHER:		П
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.  REACTIVE CURRENTLY TA'D VGEU #44-01 AS A GLORIETA/PADDOCK OIL PRODUCER. WORK INCLUDES DRILLING OUT CIBP, STIMULATION, INSTALLING NEW STRINGS OF TUBING AND RODS AND SETTING A NEW PUMPING UNIT.  Received Hobbs OCD  OCD  OCD  OCD  OCD  OCD  OCD  OCD				
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE Lay Ih	omas title !	Regulatory Assistan	t us@conocophillips	DATE 06/15/2006
Type or print name Gay Thomas	E-mail a	ddress:		Telephone No. (432)368-1217
(This space for State use)		OC FIELD REPRES	SENTATIVE II/STA	AFF MANAGER
APPPROVED BY Laufle Conditions of approval, if any	Wink TITLE			DATE
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