Submit 3 Copies To Appropriate District State of New Mexico Form C-103 Office Energy, Minerals and Natural Resources Revised March 25, 1999 District I WELL API NO. 1625 N. French Dr., Hobbs, NM 87240 District II 30-025-03047 OIL CONSERVATION DIVISION 811 South First, Artesia, NM 87210 5. Indicate Type of Lease 2040 South Pacheco District III 1000 Rio Brazos Rd., Aztec, NM 87410 STATE X FEE Santa Fe, NM 87505 District IV 6. State Oil & Gas Lease No. 2040 South Pacheco, Santa Fe, NM 87505 B-1713 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name: (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.) Vacuum ABO Unit 1. Type of Well: Tract 13 Oil Well Gas Well Other Plugged & Abandoned 2. Name of Operator 8. Well No. ConocoPhillips Company 06 3. Address of Operator 9. Pool name or Wildcat 4001 Penbrook Street Odessa, TX 79762 Vacuum ABO Reef 4. Well Location 330 Unit Letter feet from the 660 line and East feet from the Section Township 18-S Range **NMPM** County l ea 10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3935' GR, 3950' RKB 11. Check Appropriate Box to Indicate, Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK **ALTERING CASING TEMPORARILY ABANDON** CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND **ABANDONMENT** PULL OR ALTER CASING MULTIPLE CASING TEST AND COMPLETION CEMENT JOB OTHER: OTHER: Repair roads Γx 12. 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 recompilation. ConocoPhillips is currently transferring caliche off this well location to repair roads for other locations. I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE_ __ TITLE Regulatory Assistant _DATE _ Type or print name Alva Franco Telephone No. 432/368-1665 (This space for State use) OC FIELD REPRESENTATIVE II/STAFF MANAGERS APPROVED BY

Conditions of approval, if any