Submit 3 Copies To Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources		Form C-103 Revised June 10, 2003
District I 1625 N. French Dr., Hobbs, NM 88240	Ellergy, Willierars and Natural Resources		WELL API NO. 30-025-30019
<u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210 District III	OIL CONSERVATION DIVISION		5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr. Santa Fe, NM 87505		STATE X FEE 6. State Oil & Gas Lease No.
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	Sultu 1 0, 14141 07505		B-2863-1
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 EAST VACUUM GB/SA UNIT TRACT 3374
PROPOSALS.) 1. Type of Well: Oil Well X Gas Well Other			8. Well Number 003
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 GRAYBURG/SAN ANDRES
4. Well Location			
Unit Letter L :	2630 feet from the SOUTH	line and	feet from the WEST line
Section 33 Township 17-S Range 35E NMPM County LEA			
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3950' GL			
12. Check A NOTICE OF INTERPORT REMEDIAL WORK TEMPORARILY ABANDON PULL OR ALTER CASING	Appropriate Box to Indicate NIENTION TO: PLUG AND ABANDON CHANGE PLANS MULTIPLE	SUB REMEDIAL WOR COMMENCE DRI	SEQUENT REPORT OF: K
FULL OR ALTER CASING	COMPLETION	CASING TEST AN CEMENT JOB	ND
OTHER:		OTHER: REACTI	
 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. STATAS: CHANGE STATUS TO ACTIVATE WELL (9/6/06) TESTED 8/23/06 OIL = 19.1 GAS = 45.8 WATER = 53.4 			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE Jay Momas TITLE Regulatory Technician DATE 09/20/2006 Gay.Thomas@conocophillips.com			
Type or print name Gay Thomas	E-mail ac		Telephone No. (432)368-1217
(This space for State use)			
APPPROVED BY Kus Williams TITLE Dest. Superior DATE 10/17/06 Conditions of approval, if any:			