Submit 3 Copies To Appropriate District Office District I	State of New Mexico Energy, Minerals and Natural Resources		Form C-103 Revised June 10, 2003		
1625 N. French Dr., Hobbs, NM 88240	2		WELL AP	I NO. 30-025-32067	
District II 1301 W. Grand Ave., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505	OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505		5. Indicate Type of Lease STATE X FEE 6. State Oil & Gas Lease No. 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 N EAST VA TRACT 32	7. Lease Name or Unit Agreement Name EAST VACUUM GB/SA UNIT TRACT 3202	
PROPOSALS.) 1. Type of Well: Oil Well X Gas Well Other			8. Well N	8. Well Number 20	
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 P :_	feet from the SOUT	TH line and	850	feet from the EAST line	
Section 32		Range 35E	NMPM	County LEA	
	11. Elevation (Show whether I 3956' GL	DR, RKB, RT, GR, e	etc.)		
12. Check A NOTICE OF INTERPORT REMEDIAL WORK TEMPORARILY ABANDON	Appropriate Box to Indicate FENTION TO: PLUG AND ABANDON CHANGE PLANS		BSEQUENT rk	© REPORT OF: ☐ ALTERING CASING ☐	
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST A	AND	ABANDONMENT	
OTHER:		OTHER: REACT	TIVATE WEL	L 🛚 🗓	
 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 = 10.8 GAS = 143 WATER = 623 					
			A S		
I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE Hay Manager TITLE Regulatory Technician DATE 09/20/2006					
7		Gay.Thom	as@conocophi	illips.com	
Type or print name Gay Thomas (This space for State use)	E-mail	address:		Telephone No. (432)368-121	
APPPROVED BY	Elliam MILLE	RICH SUPERVISOR	GENERAL AV	DA 0£T 2 0 2006	