

District I

1625 N. French Dr., Hobbs, NM 88240

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

WELL API NO.

30-025-30279

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

B-1527

7. Lease Name or Unit Agreement Name
East Vacuum Grayburg San Andres Unit
Tract 3127

8. Well Number 009

9. OGRID Number

217817

10. Pool name or Wildcat

Vacuum; Grayburg-San Andres

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
PROPOSALS.)

1. Type of Well: Oil Well ☒ Gas Well ☐ Other ☐

2. Name of Operator

ConocoPhillips Company

3. Address of Operator

P. O. Box 51810
Midland, TX 79710-1810

4. Well Location

Unit Letter P : 1175 feet from the South line and 740 feet from the East line

Section 31 Township 17S Range 35E NMPM County Lea

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

3975.4' GR

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐ CHANGE PLANS ☐

PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ P AND A ☐

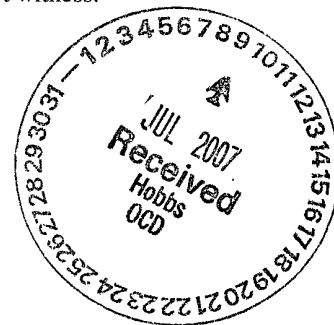
CASING/CEMENT JOB ☐

OTHER: ☐

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.

05/14/07 - 06/01/07

Returned well to production, MIT dated 06/01/07 attached. OCD notified of testing, but did not witness.



I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE

Celeste G. Dale

TITLE Regulatory Specialist

DATE 07/05/2007

Type or print name Celeste G. Dale

For State Use Only

OCD FIELD REPRESENTATIVE II/STAFF MANAGER

E-mail address: celeste.g.dale@conocophillips.com Telephone No. (432)688-6884

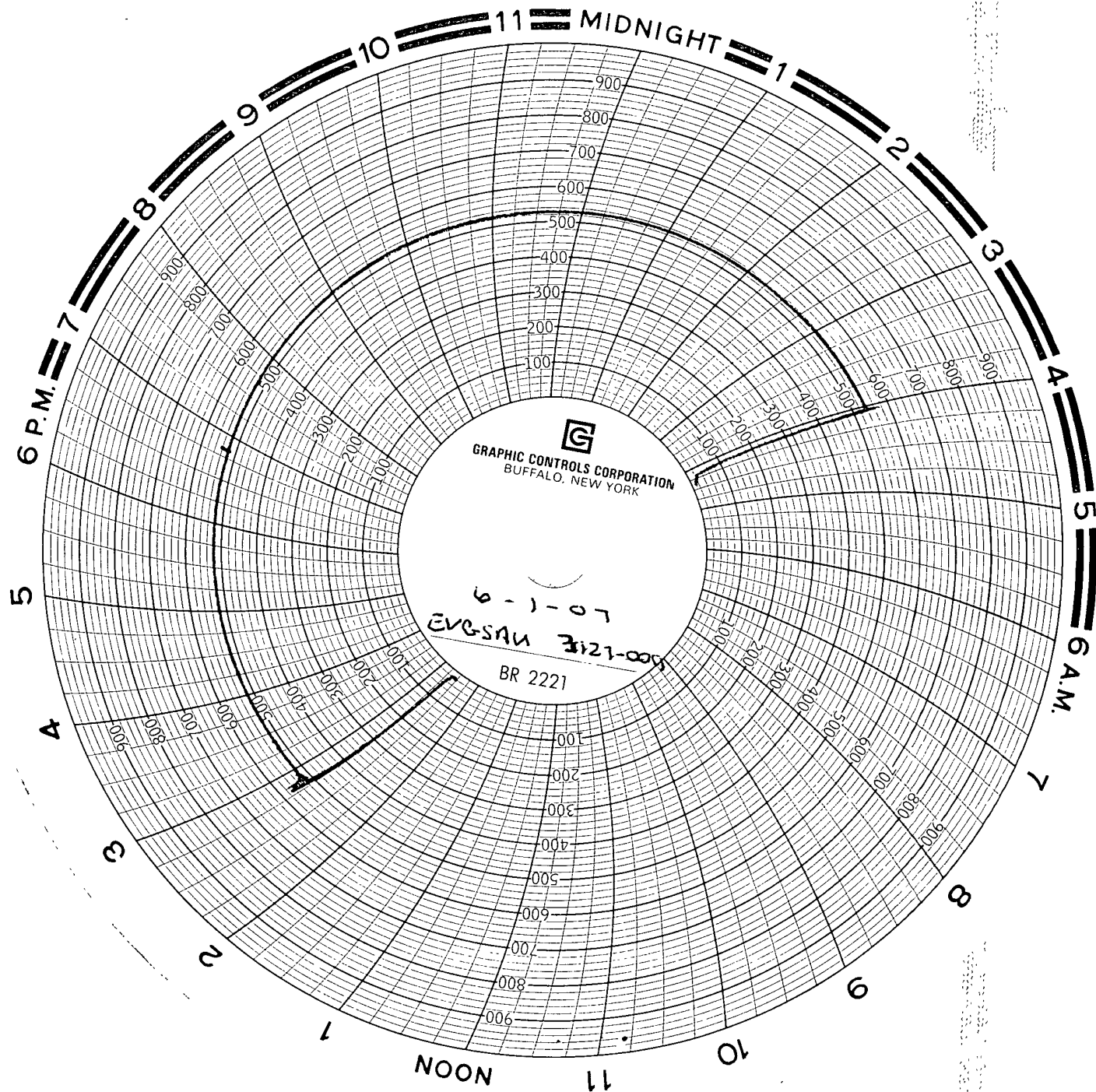
APPROVED BY:

Larry W. Wink

TITLE

DATE JUL 09 2007

Conditions of Approval (if any):



EVGSAU 3122 009

Called Maxie Brown w/
NMOCD to witness. (Did
not show for press test)

fi young

30-025-30279