| Office Office | State of New Mexico | | | Form C-103 |
|---|---|---------------------------|------------------------------------|---------------------|
| District I | Energy, Minerals and Natu | ıral Resources | WELL API NO. / | June 19, 2008 |
| 1625 N. French Dr., Hobbs, NM 88240 District II | | | 30-025-02872 | |
| 1301 W. Grand Ave , Artesia, NM 88210 District III | OIL CONSERVATION DIVISION | | 5. Indicate Type of Lease | e , |
| 1000 Rio Brazos Rd, Aztec, NM 87410 | 1220 South St. Francis Dr. | | | FEE 🗌 🗸 |
| District IV 1220 S. St. Francis Dr , Santa Fe, NM 87505 | Santa Fe, NM 87505 | | 6. State Oil & Gas Lease B 2735 | No. |
| SUNDRY NOTICES AND REPORTS ON WELLS | | | 7. Lease Name or Unit A | greement 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 Tract 4 Battery 4 | |
| 1. Type of Well: Oil Well Gas Well Other Try exter | | | 8. Weil Number 6 | |
| 2. Name of Operator | | | 9. OGRID Number 217817 | |
| ConocoPhillips Company 3. Address of Operator | | | 10. Pool name or Wildcat | |
| P.O. Box 51810 Midland, Tx 79710 | | | Vacuum Abo Reef | |
| 4. Well Location | | | | |
| Unit Letter B : | 990 feet from the North | line and | feet from the | East line |
| Section 26 | Township 17S Ra | | NMPM Count | y Lea (|
| | 11. Elevation (Show whether DR, 3908 GR | , RKB, RT, GR, etc. | | |
| | 2 2 3 0 0 CK | | | 100 H |
| 12. Check A | Appropriate Box to Indicate N | ature of Notice, | Report or Other Data | |
| NOTICE OF IN | ITENTION TO: | l sup | SEQUENT REPORT | · OE· |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON | REMEDIAL WOR | | ING CASING □ |
| TEMPORARILY ABANDON | CHANGE PLANS | COMMENCE DR | - | |
| PULL OR ALTER CASING | MULTIPLE COMPL | CASING/CEMEN | T JOB | |
| DOWNHOLE COMMINGLE | | | | |
| OTHER: | | OTHER: | Reclamation | |
| 13. Describe proposed or comp | leted operations. (Clearly state all p | pertinent details, an | d give pertinent dates, inclu | ding estimated date |
| of starting any proposed we or recompletion. | ork). SEE RULE 1103. For Multiple | le Completions: At | ttach wellbore diagram of pr | oposed completion |
| or recompletion. | | | | |
| The above well was plugged and aba | indoned on 3/10/2009. The dry hole | marker was install | led, equipment removed from | n location, and the |
| reclamation work is in progress. | | | | |
| | | | | 6) Cartin terms |
| | | | RECEIV | /ED |
| | | | APR 2 4 2 | 009 |
| | | | HOBBSO | f "1"\ |
| | | | | UU |
| | | | | |
| Spud Date: | Rig Release Da | te: | | |
| | | | | |
| | | | | |
| I hereby certify that the information | above is true and complete to the be | est of my knowledg | e and belief. | |
| | Cm. | Domilatore C | | 4 /02 /0000 |
| SIGNATURE | TITLE Sr. | Regulatory Sp | DATE | 4/23/2009 |
| Type or print name Qonna Wi | lliams F-mail address | Donna.J.Wil ConocoPhil | | 432-688-6943 |
| For State Use Only | L-man address | · CONOCOPILL | LIPS.COIII FRONE: | |
| ADDROVED DV. | VIN DIST | TRICT 1 SUPE | RVISOR AF | PR 2 8 2009 |
| APPROVED BY: | TITLE TITLE | | DATE 71 | 11 / 0 (009 |
| constitutions of repproved (if any). | | | | |