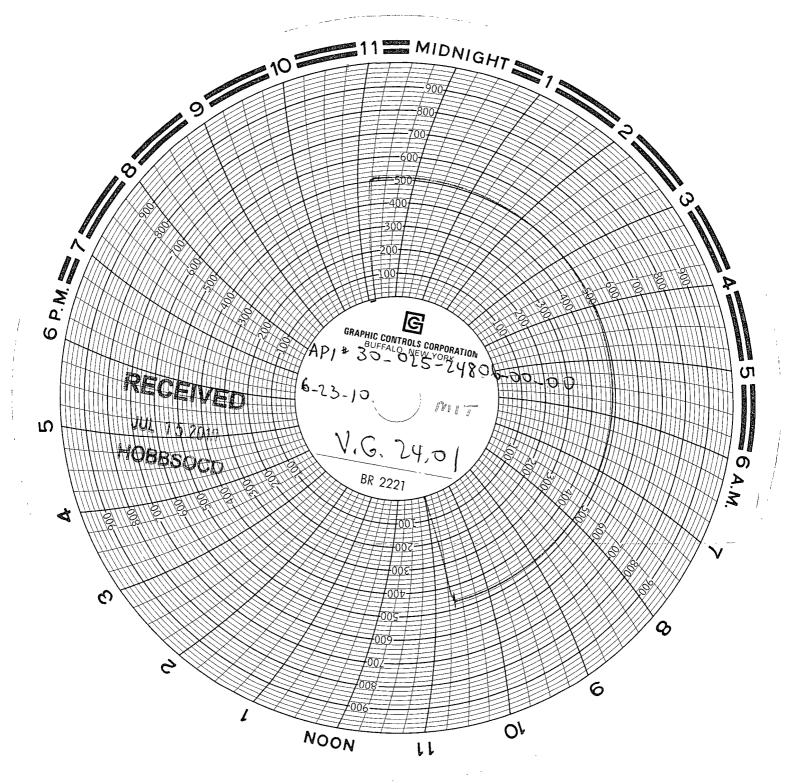
Submit 1 Copy To Appropriate District Office	State of New Mexico	Form C-103
<u>District I</u> Ene	rgy, Minerals and Natural Resources	October 13, 2009
1625 N French Dr., Hobbs, NM 88240		WELL API NO.
District II 1301 W Grand Ave Artesia WTM REPARATION OF	L CONSERVATION DIVISION	30-025-24806 /
1301 W Grand Ave., Artesia, RECEIVE	1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Rio Brazos Rd, Aztec, NM 87410	Santa Fe, NM 87505	STATE FEE
District IV 1220 S. St. Francis Dr., Santa Fe, JUL 15 2010 87505	Santa 1 C, 19191 67505	6. State Oil & Gas Lease No. B-1713-1
SUNDENCESSION	REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DI DIFFERENT RESERVOIR. USE "APPLICATION FO PROPOSALS.)	RILL OR TO DEEPEN OR PLUG BACK TO A	Vacuum Glorieta East Unit Tr 24
1. Type of Well: Oil Well Gas Well	Other V	8. Well Number 01
2. Name of Operator /		9. OGRID Number 217817 /
ConocoPhillips Company		
3. Address of Operator	d d	10. Pool name or Wildcat
P.O. Box 51810 Midland, Tx 79710		Vacuum Glorieta
4. Well Location		
Unit Letter H : 1650	feet from the North line and	990 feet from the East line
	,	
Section 33	Township 17S Range 35E	<u> </u>
11. Elev	vation (Show whether DR, RKB, RT, GR, et	(c.)
10 (1 1 4)	THE STATE OF STATE	D (04 D (
12. Check Appropri	ate Box to Indicate Nature of Notice	e, Report or Other Data
NOTICE OF INTENTION	ON TO:	BSEQUENT REPORT OF:
	AND ABANDON REMEDIAL WO	
/		PRILLING OPNS. PAND A
	PLE COMPL CASING/CEME	NT JOB
DOWNHOLE COMMINGLE		•
OTHER	ET OTHER	-A
OTHER: Continue TA	OTHER:	and give pertinent dates, including estimated date
proposed completion or recompletion	RULE 19.15.7.14 NMAC. For Multiple C	completions: Attach wendore diagram of
proposed completion of recompletion	•	VI.
ConocoPhillips Company respectfully request	for continued TA status of the above. The	CIBP is set at 6070'. Please see attached chart.
Conocor minps Company respectionly request		
	This Approval of Tone	
	Abandonment Evaluation	rary
	This Approval of Tempo Abandonment Expires _	6-63-2011
	•	
	و الإسلام من المراجعة الأسلام المراجعة من المراجعة المراج	TWO & manager state and an area
	1	The same of the sa
Spud Date:	Rig Release Date:	
I hereby certify that the information above is tr	rue and complete to the best of my knowled	dge and belief.
	Sr. Regulatory	Specialist DATE 7/12/2010
SIGNATURE L	111LE	DATEDATE
Time or mint name Donna Williams	Donna.J.Will:	
Type of print name	E-mail addre@nocophillir	PHONE: 432-688-6943
For State Use Only		
ADDROVED BY	V South	ma = 7 3 - 1
APPROVED BY:	TITLE STAFF /	192 DATE 1-20-10
Conditions of Approval (if any).		1
		7.4



CONOCO 6-23-60 @ VGEU # 240) BASI C

Recorder Calibrated 4-21-10