Submit I Copy To Appropriate District	ffice	
District I 1625 N. French Dr., Hobbs FERENEL PL 1301 W. Grand Ave., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 88410 District IV 1220 S. St. Francis Dr., Santa AOBBS OCD 87505 NM 87410 District IV 1220 S. St. Francis Dr., Santa AOBBS OCD 87505		WELL API NO. 30-025-20793
		5. Indicate Type of Lease STATE X FEE
		6. State Oil & Gas Lease No.
87505 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 Vacuum Glorieta East Unit Tract 16
PROPOSALS.) 1. Type of Well: Oil Well X Gas Well Other		8. Well Number 1
2. Name of Operator ConocoPhillips Company		9. OGRID Number 217817
3. Address of Operator 3300 N. "A" St., Bldg. 6 Midland, TX 79705		10. Pool name or Wildcat Vacuum; Glorieta
4. Well Location		
Unit Letter_D : 330 feet from the North line and 660 feet from the West line Section 5 Township 18S Range 35E NMPM CountyLEA /		
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND A TEMPORARILY ABANDON CHANGE PL		ORK ALTERING CASING CRILLING OPNS. P AND A
PULL OR ALTER CASING MULTIPLE C		ENT JOB
OTHER: OTHER: Reactivation		
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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.		
VGEU 16-1 is on the current ACOI list and has TA status that expires 5/15/2011. It was reactivated on 3/31/2011.		
Drilled out CIBP @ 6047', cleaned out to PBTD @ 6195', exchange for new 2.375" tubing, acidize existing interval of 6112' - 6132' with 2500 gal 15% HCL.		
Returned to production. 9 BOPD / 1 MCF / 128 water		
Spud Date:	Rig Release Date:	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE Jalyer N. Ale	TITLE Regulatory Specialist	DATE 04/19/2011
Type or print name_Jalyn N. Fiske E-mail address: Jalyn.Fiske@conocophillips.comPHONE: (432)688-6813		
APPROVED BY:		
Conditions of Approval (if any):	;	<u></u>
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