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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease Indian
State Fee
5. State Oil & Gas Lease No. C-1
Jicarilla Apache-147

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. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Conoco Inc.	8. Farm or Lease Name AXI Apache J
3. Address of Operator Box 460, Hobbs, New Mexico 88240	9. Well No. 33
4. Location of Well UNIT LETTER <u>N</u> <u>1050</u> FEET FROM THE <u>S</u> LINE AND <u>1835</u> FEET FROM THE <u>W</u> LINE, SECTION <u>6</u> TOWNSHIP <u>25-N</u> RANGE <u>5-W</u> NMPM.	10. Field and Pool, or Wildcat <u>S, Blanco Pictured Cliff</u>
15. Elevation (Show whether DF, RT, GR, etc.)	12. County <u>Rio Arriba</u>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER <u>Change of corporate name</u> <input checked="" type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

17. 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.

Continental Oil Company, a Delaware corporation, amended its Articles of Incorporation to change its corporate name to Conoco Inc., effective July 1, 1979.

Federal

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.
SIGNED [Signature] TITLE Division Manager DATE 6-19-79

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: NMOCD (5) Aztec FILE USGS-BUR(2)