

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C103
Revised 1-1-89

DISTRICT I

P. O. Box 1980, Hobbs, NM 88240

P.O. Drawer DD, Artesia, NM 88210

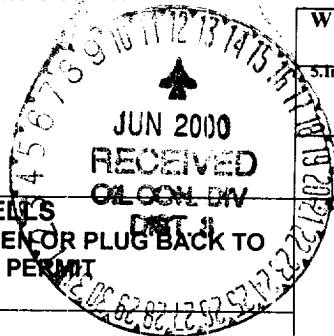
DISTRICT II

1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088



WELL API NO.	
30-039-26442	
5. Indicate type of Lease	
STATE <input type="checkbox"/>	FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	
SF 078497	
Lease Name or Unit Agreement Name	
San Juan 28-7	
8. Well No.	
271	
9. Pool name or Wildcat	
South Blanco Pictured Cliff	

SUNDY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR DEEPEN OR PLUG BACK TO DIFFERENT RESERVOIR. USE APPLICATION FOR PERMIT (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well	
Oil Well <input type="checkbox"/>	Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/>
2. Name of Operator	
Conoco Inc.	
3. Address of Operator	
10 Desta Dr., Suite 649W, Midland, Texas 79705-4500	
4. Well Location	
Unit Letter D 750 Feet From The North Line and 1230 Feet From The West Line	
Section 2 Township 27N Range 7W NMPM Rio Arriba County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	
6122'	

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

NOTICE OF INTENT TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: Change pool objective to a single zone ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

12. 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.

Conoco Inc. proposes to change our plans to drill to a single zone (South Blanco Pictured Cliff) rather than to commingle as reported on the previously submitted and approved APD.

13. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Jo Ann Johnson TITLE Sr. Property Analyst DATE 6/2/00
TYPE OR PRINT NAME Jo Ann Johnson TELEPHONE NO. 915-686-5515

(this space for State Use)

APPROVED BY Original Signed by FRANK T. CHAVEZ SUPERVISOR DISTRICT # 3 DATE JUN 12 2000