Submit 3 Copies to Appropriate District Offices

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

| DISTRICT I P.O. Box 1980, Hobbs, NM 88240 DISTRICT II P.O. Drawer DD, Artesia, NM 88210 DISTRICT III | OIL CONSERVATI 310 Old Santa Fe Tra Santa Fe, New Mexi | il, Room 206 | WELL API NO. 30-045-29748 5. Indicate Type of Lease STATE X FEE | | | |
|--|---|----------------------------------|---|-------------------------------------|---|--|
| 1000 Rio Brazos Rd., Aztec, NM 87410 | | | 6. State Oil & G | as Lease No. | 1 | |
| (DO NOT USE THIS FORM FOR PRO DIFFERENT RESER | CES AND REPORTS ON WEDPOSALS TO DRILL OR TO DEEP VOIR. USE "APPLICATION FOR P 101) FOR SUCH PROPOSALS.) | EN OR PLUG BACK TO A | 7. Lease Name o | r Unit Agreement Name | | |
| 1. Type of Well: OIL WELL GAS WELL | OTHER | | | | | |
| 2. Name of Operator CONOCO, INC. | | | 8. Well No. 12 | | | |
| 3. Address of Operator P.O. BOX 2197 HOUSTON, TX | 77252 | | 9. Pool name or N DAKOTA/MES | | | |
| 4. Well Location Unit Letter :1825 | Feet From The SOUTH | Line and _790 | Feet Fron | n The EAST Line | | |
| Section 16 | | | NMPM SAN JUA | AN County | 1 | |
| | 10. Elevation (Show whe | ther DF, RKB, RT, GR, etc.) | | | | |
| • | opropriate Box to Indicate N | | • | | _ | |
| NOTICE OF INT | ENTION TO: | SUB: | SEQUENT R | REPORT OF: | | |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON | REMEDIAL WORK | | ALTERING CASING | | |
| TEMPORARILY ABANDON | CHANGE PLANS X | COMMENCE DRILLING | OPNS. | PLUG AND ABANDON | | |
| PULL OR ALTER CASING | | CASING TEST AND CEM | MENT JOB | | | |
| OTHER: | | OTHER: | | | | |
| 12. Describe Proposed or Completed Oper work) SEE RULE 1103. | | • | lates, including estin | nated date of starting any proposed | _ | |
| Conoco requests that the Mesave well was approved for downhole c | | | 234 | 56 | | |
| C-102 is attached. | | | MAY 200 RECEIV ORLOOM. DIST. | OO /ED ON S | | |
| <u> </u> | | | | | _ | |
| I hereby certify that the information above is true | 11/1/08 | and belief. TLE REGULATORY AN | IALYST | DATE_05/02/2000 | _ | |
| TYPE OR PRINT NAME DEBORAH MA | | | TELEPHONE NO. (| | = | |
| (This space for State Use) Original Signed b | v STEVEN N. HAYDEN | OFFITY OIL & GAS I | Inspector, dist. | MAY -3 200 | n | |
| APPROVED BY | T) | TLE | ······ | DATE | • | |

CONDITIONS OF APPROVAL, IF ANY:

V

District I PO Box 1980, Hobbs, NM 88241-1980 State of New Mexico Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION

2040 South Pacheco Santa Fe, NM 87505

Form C-102 Revised October 18, 1994 Instruction on back

District II 811 South First, Artesia, NM 88210

Submit to Appropriate District Office

District III 1000 Rio Brazos Rd., Aztec, NM 87410 State Lease - 4 Copies

AMENDED REPORT

District IV 2040 South Pacheco, Santa Fe, NM 87505 Fee Lease - 3 Copies

WELL LOCATION AND ACREAGE DEDIC

| | | | ELLI | .OCATR | <u>JN AND</u> | AU. | REAGE DED | ICATION P | LAT | | |
|--------------------------------|-------------|----------------|------------------------|----------------------------|------------------------|--------|---------------------------------|---------------|-----------|--------------------------|------------------------|
| ¹ API Number | | | ² Pool Code | | ³ Pool Name | | | | | | |
| 30-045-29748 | | | 7231 | 72319 / 71599 | | | BLANCO MESAVERDE / BASIN DAKOTA | | | | |
| Property Code 003275 STATE CO | | | ом о | ⁵ Property Name | | | | | | ⁶ Well Number | |
| ⁷ OGRID 005073 | No. | CONOCC |), INC. | | * Op | erator | Name | | | | ² Elevation |
| ¹⁰ Surface Location | | | | | | | | | | | |
| UL or lot no. | Section | Township | Range | Lot Idn | Feet from th | ıe | North South line | Feet from the | East West | line | County |
| 1 | 16 | 29N | 8W | | 1825 | | SOUTH | 790 | EAST | | SAN JUAN |
| | | | | Bottom Ho | ole Locati | on If | Different Fro | m Surface | | | |
| UL or lot no. | Section | Township | Range | Lot Idn | Feet from th | ie | North/South line | Feet from the | East/West | line | County |
| Dedicated Acr | es 13 Joint | or Infill 14 C | onsolidati | on Code 15O | rder No. | | | | | | |

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A

| NON-STA | NDARD UNIT HAS BEED | APPROVED BY THE | DIVISION |
|---------|---------------------------------------|--------------------------------------|--|
| 16 | # # # # # # # # # # # # # # # # # # # | | ¹⁷ OPERATOR CERTIFICATION |
| | ‡ | | I hereby certify that the information contained herein is true |
| | | V V V V | and complete to the best of my knowledge and belief |
| | | 1 4 5 6 | |
| | | | <u>.</u> |
| | MAY MAY | 2000 | \wedge |
| | # 180 Paro | 2000 EIVED III ON. DV ST. 3 | _Signature Seleral Marle |
| | | ST. 3 | Printed Name DEBORAH MARBERRY |
| | | 11/2/2 | <u> </u> |
| | | 61.81. all. | Title REGULATORY ANALYST |
| | | | Date 04/06/2000 |
| | | z | ¹⁸ SURVEYOR CERTIFICATION |
| | | | I hereby certify that the well location shown on this plot was |
| | | | plotted from field notes of actual surveys made by me or under |
| | | 2 | |
| | | | Date of Survey |
| | | | Signature and Seal of Professional Surveyer |
| | | | |
| | 1 | | |
| | | | |
| | | | |
| | | | Certificate Number |