

Submit 3 Copies
to Appropriate
District Office

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
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30-045-27911
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

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. Type of Well:
OIL WELL ☐ GAS WELL ☒ OTHER

2. Name of Operator
Conoco Inc.

3. Address of Operator
3817 N. W. Expressway, Oklahoma City OK 73112

4. Well Location
Unit Letter K : 1800 Feet From The South Line and 1800 Feet From The West Line
Section 9 Township 29N Range 14W NMPM San Juan County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
5314' GR

11. 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"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: Notice of Change of Operator <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

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.

Effective July 1, 1991, Mesa Operating Ltd. Partnership will transfer operatorship of the subject well to Conoco Inc., 3817 N.W. Expressway, Oklahoma City, OK 73112.

Please contact Sonya Baker (405) 948-3100 if you have any questions.

RECEIVED
JUN 21 1991

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

SIGNATURE Sonya Baker TITLE Sr. Oil & Gas Assistant DATE 6-17-91

TYPE OR PRINT NAME Sonya Baker TELEPHONE NO. 405-948-3100

(This space for State Use)
APPROVED BY Frank J. [Signature] TITLE SUPERVISOR DISTRICT # 3 DATE JUN 21 1991

CONDITIONS OF APPROVAL, IF ANY: