

T Gas
R
A
N
S

BO/D Grav. 1st Del. Gas
I.P. MCF/D After Hrs. SICP PSI After Days GOR 1st Del. Oil

TOPS		NI/D	X	Well Log		TEST DATA						
Ojo Alamo		C-103		Plat	X	Schd.	PC	Q	PW	PD	D	Ref.No.
Kirtland		C-104		Electric Log								
Fruitland				C-122								
Pictured Cliffs		Ditr		Dfa								
Chacra		Datr		Dac								
Cliff House												
Menefee												
Point Lookout												
Mancos												
Gallup												
Greenhorn												
Dakota												
Entrada												
		N/319.40 Acres										
		Mean Oper. HTO										

BasinFrCoal Co. SJ S 01 T 29N R 13W UA Oper. Conoco, Inc.

Lse. FC Fee Com No. 5

FC Fee Com #5

A-01-29N-13W

Conoco, Inc.

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. 30-045-28175
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name FC FEE COM
8. Well No. #5
9. Pool name or Wildcat Basin Fruitland Coal
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 5450' GR

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	2. Name of Operator CONOCO INC.	3. Address of Operator 3817 NW Expressway, Oklahoma City, OK 73112	4. Well Location Unit Letter <u>A</u> : <u>1105</u> Feet From The <u>north</u> Line and <u>975</u> Feet From The <u>east</u> Line Section <u>1</u> Township <u>29N</u> Range <u>13W</u> NMPM San Juan County
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

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

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.

Please cancel the permit on the above well. Drilling is not planned as of this time.

ABANDONED LOCATION

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

SIGNATURE Barbara J. Bale TITLE Regulatory Affairs Sr. Oil & Gas Asst. DATE 2-7-92
TYPE OR PRINT NAME Barbara J. Bale TELEPHONE NO. (405) 948-3100

(This space for State Use)

APPROVED BY Original Signed by FRANK T. CHAVEZ TITLE SUPERVISOR DATE FEB 11 1992
CONDITIONS OF APPROVAL, IF ANY: