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

OII

P.O. Box 1980, Hobbs, NM 88240

P.O. Drawer DD, Artesia, NM 88210

L CONSERVATION DIVISION P.O. Box 2088	WELL API NO.	 
	30-045-27909	 
Santa Fe, New Mexico 87504-2088	5. Indicate Type of Lease	

**NMPM** 

FEE X STATE DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410 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 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Type of Well: MEIT OIL FC Fee Com Name of Operator 8. Well No. Conoco Inc. 9. Pool name or Wildcat 3. Address of Operator 3817 N. W. Expressway, Oklahoma City OK 73112 Basin Fruitland Coal 4. Well Location G: 2235 Feet From The North Line and <u>1800</u> \_\_ Feet From The \_\_\_East\_

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Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data					
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK PLUG AND ABANDON		REMEDIAL WORK ALTERING CASING	_		
TEMPORARILY ABANDON CHANGE PLANS		COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT	_		
PULL OR ALTER CASING		CASING TEST AND CEMENT JOB			
OTHER: Notice of Change of Operator	X	OTHER:			

Range

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

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.

32N

Township

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

County

JUN2 1 1991/

San Juan

O'L CON. DIV. DIST. 3

I hereby capilly that the information above at true and complete to the best of my know	viedge and belief.  TITLE Sr. 0il & Gas Assistant	DATE (0-17-91
TYPEOR FRINT NAME Sonya Baker		TELEPHONE NO 405-948-3100
(This space for State Use) Frank J. Caux	SUPERVISOR DISTRICT # 3	JUN 2 1 1991

CONDITIONS OF AFTROVAL, IF ANY: