

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. 30-045-29366
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. NM-778-10
7. Lease Name or Unit Agreement Name STATE COM M (003273)
8. Well No. 9R
9. Pool name or Wildcat BLANCO MESAVERDE (72319)

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. <005073>	
3. Address of Operator 10 Desta Drive Ste 100 W, Midland, TX 79705	
4. Well Location Unit Letter B : 897 Feet From The NORTH Line and 1783 Feet From The EAST Line Section 36 Township 32 N Range 11W NMPM SAN JUAN County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 6184	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☒
OTHER: ☒	PLUG AND ABANDONMENT ☐
	CASING TEST AND CEMENT JOB ☐
	OTHER: SET PRODUCTION CSG ☐

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.

DRILL 6 1/4" HOLE TO TOTAL DEPTH OF 6890'. GIH W/ 137 JTS. 4 1/2" 11.60# K-55 LT&C CSG SET @ 5686'. SHOE SET @ 5686'. COLLAR SET @ 5641'. LEAD SLURRY 1650 SX 50/50 POZ + CLASS 'B' CMT + 4% GEL (BENTONITE) + 6 1/4#/SX GILSONITE + 2% CACL2 + .5% CF-14. TAIL SLURRY 140 SX CLASS 'B' CMT + 2% CACL2 + 1/4"/SX CELLO FLAKE.

RELEASE RIG @ 6 pm ON 6-13-96.

CURRENTLY WAITING ON COMPLETION RIG.

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

SIGNATURE <i>Bill R. Keathly</i>	TITLE SR. REGULATORY SPEC.	DATE 6-18-96
TYPE OR PRINT NAME BILL R. KEATHLY		TELEPHONE NO. 915-686-5424

(This space for State Use)

APPROVED BY <i>Johnny Robinson</i>	TITLE	DATE JUN 2 1996
CONDITIONS OF APPROVAL, IF ANY:		