

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

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.	30-025--07834
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	LC-031670B

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.)		7. Lease Name or Unit Agreement Name SENU McKee	
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Injection	8. Well No. #59		
2. Name of Operator Conoco Inc.	9. Pool name or Wildcat Warren McKee		
3. Address of Operator P.O. Box 460 - Hobbs, NM 88240	4. Well Location Unit Letter <u>M</u> : <u>660</u> Feet From The <u>South</u> Line and <u>660'</u> Feet From The <u>West</u> Line Section <u>20</u> Township <u>20S</u> Range <u>38E</u> NMPM Lea County		
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3550' GL			

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <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.

- MIRU. NU BOP. C.O. to 4" liner top @ 8971'. Reverse Circ. & C.O. to TD @ 9210'. Pickle Workstring.
- Set treating packer @ 8950'. Acidize/ClO₂ treat in 4 stages: 25Bbls of 15% HCl-Ne-Fe acid, 3 bbls 10 ppg brine, 50 bbls of .3% Dichlor-S mixed w/completion fluid, 3 bbls of 10 ppg brine, 25 bbls of 15% HCl-NE-Fe acid, 3 bbls of 10 ppg brine, 5 bbls of 10 ppg w/2 lb/gal 100 mesh salt. SI for 1 hour.
- Set injection packer @ 8836' & circulate packer fluid.
- Approx. 2 weeks after stimulating, run injection profile log and step rate test.

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

SIGNATURE W.W. Baker TITLE Administrative Supervisor DATE Sept. 6, 1989

TYPE OR PRINT NAME _____ TELEPHONE NO. _____

(This space for State Use) ORIGINAL SIGNED BY JERRY BENTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE SEP 12 1989

CONDITIONS OF APPROVAL, IF ANY: