

NEW MEXICO OIL CONSERVATION COMMISSION

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
B-1533 1/2	

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name
2. Name of Operator Conoco Inc.	8. Farm or Lease Name STATE AC Com
3. Address of Operator P. O. Box 460, Hobbs, New Mexico 88240	9. Well No. 6
4. Location of Well UNIT LETTER <u>E</u> <u>1980</u> FEET FROM THE <u>NORTH</u> LINE AND <u>660</u> FEET FROM THE <u>WEST</u> LINE, SECTION <u>30</u> TOWNSHIP <u>19-S</u> RANGE <u>37-E</u> NMPM.	10. Field and Pool, or Wildcat EUNICE MONUMENT G/SP
15. Elevation (Show whether DF, RT, GR, etc.)	12. County LEA

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"/>	PLUG AND ABANDON <input 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"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <u>SHUT-OFF WATER</u> <input checked="" type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

MIRU 10/18/83. SPOTTED 8 SXS CLASS "C" CMT
w/ 2% CaCl₂ 3905' - 3965'. WOC. TOC
@ 3904'. SWBD. REL PKR @ 3800'. RAN
PRODUCTION EQUIPMENT w/ TBG SET @ 3864'.
PUMPED 172 BO, 6 BW, + 102 MCF IN 24
HRS 10/31/83.

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

SIGNED [Signature] TITLE Administrative Supervisor DATE 12/20/83

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT 1 SUPERVISOR

TITLE

DATE

DEC 27 1983

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

DEC 22 1983

O.C.D.
HOBBS OFFICE