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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. B-2656
7. Unit Agreement Name
8. Farm or Lease Name State A-17
9. Well No. 7
10. Field and Pool, or Wildcat Eunice Monument G-SA
12. County Lea

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. OIL WELL GAS WELL OTHER

2. Name of Operator
CONOCO INC.

3. Address of Operator
P. O. Box 460, Hobbs, N.M. 88240

4. Location of Well
UNIT LETTER M 330 FEET FROM THE South LINE AND 330 FEET FROM THE West LINE, SECTION 17 TOWNSHIP 19S RANGE 37E NMPM.

15. Elevation (Show whether DF, RT, CR, etc.)

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 <u>rep. csg leak</u> <input checked="" type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

7. 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. Test csg & isolate leak(s). A squeeze procedure will follow. Log gamma ray & CCL from TD - 3400'. Set pkr @ 3930'. If communication exists, sqz perms 3936' - 3978' as follows: Set cmt ret @ 3930'. Pump 100 sxs class "H" cmt w/ 3% Halad 4. Displace w/ 15.2 bbl fresh wtr. If no communication, set RBP @ 3930'. Place well on prod.

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 8/12/85

ORIGINAL SIGNED BY EDDIE SEAY

OIL & GAS INSPECTOR

DATE AUG 14 1985

APPROVED BY _____

TITLE _____

DATE _____

RECEIVED
AUG 13 1985
FBI - MEMPHIS