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State of New Mexico

Form C 103

to Appropriate District Office	Energy, Minerals and Natural Resources Department			Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM S8240	OIL CONSERVATION DIVISION		WELL API NO.	-
P.O. Box 2088			İ	0-025-09087
P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico 87504-2088		5. Indicate Type of Lease	
DISTRICT T11 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas L	STATE FEE
1000 Rio Biazos Ra., 7/2100, 1991 67410			6. State Off & Gas L	Lease No.
(DO NOT USE THIS FORM FOR PRODIFFERENT RESE	ICES AND REPORTS ON WEL DPOSALS TO DRILL OR TO DEEPEN RVOIR. USE •APPLICATION FOR PE -101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A	7. Lease Name or U	//////////////////////////////////////
1. Type of Well:			-	
Well Well	other Injection Well		South Eunice Unit	
2. Name of Operator Conoco Inc.	co Inc		8. Well No. 47	
3. Address of Operator			9. Pool name or Wildcat	
10 Desta Dr. Ste 100W, Midland, Tx,, 79705-4500			Eunice 7 Rvrs Queen, So.	
4. Well Location Unit Letter I 2210	E de South	2	30 Feet From	Egat
Unit Letter I 2210	Feet From The South	Line and 3	Feet From	The East Lin
Section 28	Township 22S Ra	ange 36E	NMPM	Lea County
	11. Elevauon (Show whether	DF, RKB. RT, GR, ctc.)		///////////////////////////////////////
Check	Appropriate Box to Indicate	Nature of Notice 5		
NOTICE OF IN			SEQUENT RE	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	<u> </u>	ALTERING CASING
remporarily abandon	CHANGE PLANS	COMMENCE DRILLING	GOPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND C	EMENT JOB	
OTHER:		OTHER	Temporary Al	oandon
12. Describe Proposed or Completed O work)SEE RULE 1103.	perations (Clearly state all pertinent details	s, and give pertinent dates, in	cluding estimated date or	f starting any proposed
12-12-97 MIRU, POOH W/ produc Copy of chart attached.	tion equipment. GIH set CIBP at	3560', circulate packer	fluid and test csg t	o 600# for 30 min, held.
Conoco requests permission to temp	oorary abandon this well, while we	e evaluate it for possib	le future use	
zonoco requests permission to temp	Total y abandon this won, while we	evaluate it for possion	ie ratare use.	
			,	, .
	Ti	nis Approval of Sandamsent Expi	Temporary, /	65/1/00/2
	H.	speciments expl	795	1300
12. I hereby certify that the information above is tr	rue and complete to the best of my knowledge and	\ /	Ci-li-t	12.26.07
SIGNATURE	early	Sr. Regulat	ory Specialist	DATE12-26-97
TYPE OR PRINT NAME_Bill R. Keathly				TELEPHONE NO. 915 686-542
di Cara Magapionia Sici	NED BY CHRIS WILLIAMS CT I SUPERVISOR			58 65 7 3
APPROVED BY	ттт	LE		DATE

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CONITIONS OF APPROVAL, IF ANY: