

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.	30-025-06706	✓
5. Indicate Type of Lease	STATE ☐	FEE ☒
6. State Oil & Gas Lease No.		
7. Lease Name or Unit Agreement Name	M.E. WANTZ	
8. Well No.	1	
9. Pool name or Wildcat	BLINERRY OIL & GAS	

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.	
3. Address of Operator 10 Desta Drive STE 100W, Midland, TX 79705	
4. Well Location Unit Letter <u>N</u> : <u>2310</u> Feet From The <u>WEST</u> Line and <u>440</u> Feet From The <u>SOUTH</u> Line Section <u>21</u> Township <u>21 S</u> Range <u>37 E</u> NMPM LEA County	
10. Elevation (Show whether DF, RCB, RT, GR, etc.)	

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: PUT ON PUMP ☒

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.

3-25-93 MIRU. POOH W/ TBG. RIH TAGGED FILL @ 5920', POOH. GIH W/ SAND PUMP. CLEAN OUT FILL TO 5975'. POOH. GIH W/ TBG. TO 5942', PUMP & RODS W/ PATCO SCRAPER. BUILD WELLHEAD
3-30-93 RDMO. RETURN WELL TO PRODUCTION.

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

SIGNATURE Bill R. Keathly TITLE SR REGULATORY SPEC. DATE 4-20-93
TYPE OR PRINT NAME BILL R. KEATHLY TELEPHONE NO. 915-686-5424

(This space for State Use)

Orig. Signed by
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

APR 22 1993