				ICF	
Submit 3 Copies To Appropriate District Office	State of New	1	1	Form C-10	
District I	Energy, Minerals and	Natural Resources V	WELL API NO.	Revised March 25, 19) 99
1625 N. French Dr., Hobbs, NM 88240 District II	OIL CONCEDUAT	ION DIVICION	30-015-32320	7	
1301 W. Grand Ave., Artesia, NM 88210 District III	OIL CONSERVAT 1220 South St.		5. Indicate Type	of Lease)
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, N		STATE	FEE /	
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	Sama Pe, M	W1 07303	6. State Oil & C	Gas Lease No.	
87505					
SUNDRY NOTICE (DO NOT USE THIS FORM FOR PROPOSAL DIFFERENT RESERVOIR. USE "APPLICA" PROPOSALS.)		OR PLUG BACK TO A	7. Lease Name of	r Unit Agreement Nam	e:
1. Type of Well:			Chida		ļ
	ther		Clyde	·	
2. Name of Operator Concho Oil & Gas Corp.			8. Well No.		
3. Address of Operator			9. Pool name or V	Wildcat	
110 W. Louisiana, Ste 410, Midland,	TX 79701		Carlsbad; Morrow		
4. Well Location					
Unit Letter P : 660' feet from the South line and 990' feet from the East line					
Section 22	Township 23S	Range 26E	NMPM	County Eddy	
	10. Elevation (Show wheth	er DR, RKB, RT, GR, etc	:.)		
	3286' GR propriate Box to Indica	te Nature of Notice	Report or Other	Data	
NOTICE OF INTE			SEQUENT RE		
	PLUG AND ABANDON	REMEDIAL WOR	·	ALTERING CASING [
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRI	LLING OPNS.	PLUG AND [\supset
	MULTIPLE COMPLETION	CASING TEST AN	ND 🗆	ABANDONMENT	
OTHER:	П	OTHER: Set Casi	ina	Б	7/
12. Describe proposed or completed o				acluding estimated date	of
starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.					
7/17/02 PHI 12 I/" hala Pan 0 5/8" 4/	0# I 55 agains & set at 2740	V Coment engine with 6	00 ava Poz C + odd	itizza er tailad/200 ar	C
7/17/02- RIH 12 ¼" hole. Ran 9 5/8" 40 + additives. Circ 109 sxs to pi		. Cement casing with 6	90 sxs Poz C + add	itives & tailed w/200 s	xs C
additives. One 100 sas to pr	••				
I hereby certify that the information about	ove is true and complete to t	he best of my knowledge	e and belief.		
SIGNATURE DURA GAST	L. A. THE			DATE 5/22/02	
SIGNATURE JUVIA CAST	aments TITL	E Production Analyst		DATE7/23/02	
Type or print name Dora Bustamante			Telephone	No. (915) 683-7443	
(This space for State use)			, 		-
A DEPT OVER DAY	7) TITE	7		DA MIL 3 0 2002	
APPPROVED BY Lecard (Conditions of approval, if any:	On ly TITLI	3 75262	220	DATE	-
Conditions of approval, if any.	O	1.2	272320303		
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