+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 S8240

P.O. Drawer DD, Artesia, NM 88210

DISTRICT TII
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30-039-25875

5. Indicate Type of Lease

STATE [X]   FEE [ ]

6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO
DIFFERENT RESERVOIR. USE •APPLICATION FOR PERMIT
(FORM C-101) FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name

1. Type of Well:
Oil Well [X]   Gas Well [ ]   OTHER

Lindrith B

2. Name of Operator

Conoco Inc.

8. Well No. 100

3. Address of Operator

10 Desta Dr. Ste 100W, Midland, Tx,, 79705-4500

9. Pool name or Wildcat
Lindrith Gallup-Dakota West

4. Well Location

Unit Letter C   475   Feet From The   North   Line and   2305   Feet From The   West   Line

Section 14   Township 24N   Range 3W   NMPM   Rio Arriba   County

10. Elevation (Show whether DF, RKB. RT, GR, etc.)

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WOR [ ]   PLUG AND ABANDON [ ]

TEMPORARILY ABANDON [ ]   CHANGE PLANS [ ]

PULL OR ALTER CASIN [ ]

OTHER: Extension of Time [X]

SUBSEQUENT REPORT OF:

REMEDIAL WOR [ ]   ALTERING CASIN [ ]

COMMENCE DRILLING OPNS. [ ]   PLUG AND ABANDONMEN [ ]

CASING TEST AND CEMENT JO [ ]

OTHER [ ]

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.

This is a request to extend the approved APD for another 12 month period.

RECEIVED
MAY 1 4 1999
OIL CON. DIV.
DIST. 3

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

SIGNATURE _____   TITLE Sr. Property Analyst   DATE 05/12/99

TYPE OR PRINT NAME Jo Ann Johnson   TELEPHONE NO. 915/686-5515

(this space for State Use)

ORIGINAL SIGNED BY ERNIE BUSCH   DEPUTY OIL & GAS INSPECTOR, DIST. #3   MAY 2 4 1999

APPROVED BY _____   TITLE _____   DATE _____

CONITIONS OF APPROVAL, IF ANY: