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

OIL CONSERVATION DIVISION

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL API NO. 30-045-27731

10. 20. 22, 14. 00210	5. Indicate Type of Lease
DISTRICT III	STATE X FEE
1000 Rio Brazos Rd., Aztec, NM 87410	6. State Oil & Gas Lease No.
	E-5382-0
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"	7. Lease Name or Unit Agreement Name
(FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well:	FC STATE COM
OIL GAS WELL X OTHER	
2. Name of Operator	
CONOCO INC.	8. Well No. 20
3. Address of Operator	
1 .	9. Pool name or Wildcat
3817 NW Expressway, Oklahoma City, OK 73112	Basin Fruitland Coal
Unit Letter B: 990 Feet From The North Line and	1450 Feet From The East Line
	· - · · · · · · · · · · · · · · · · · ·
Section 2 Township 30N Range 8W	NMPM San Juan County
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	V/////////////////////////////////////
(/////////////////////////////////////	<i>*************************************</i>
11. Check Appropriate Box to Indicate Nature of Notice,	Pennet or Other Date
NOTICE OF INTENTION TO:	BSEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLIN	NG OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING CASING TEST AND C	CEMENT JOB X Casing Pressure Test
	Schicht sop Em odding Tressare Test
OTHER:OTHER:	
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, inc. work) SEE RULE 1103.	luding estimated date of starting any proposed
The surface casing pressure test was run by Mesa Opera as follows:	ting on 4-22-91
Pressure Test Blind Rams, Choke Manifold & Casing - 25 Held OK.	0#/15 min., 2500#/15 min.
m F C	
	▶ 사고 보는 ::: :
007	28 199 1
- · ·	A 3 B C 4
OIL C	ON. DIV.

xc: WF, MAB, BJB I hereby certify that the information e is true and complete to the best of my knowledge and belief.

mme Sr. Oil & Gas Assistant

DIST. 3

DATE 10-23-91 (405)

TYPE OR PRINT NAME

SIGNATURE

Barbara J. Bale

TELEPHONE NO. 948-3100

(This space for State Use)

Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT #3

DATE OCT 2 8 1991

CONDITIONS OF APPROVAL, IF ANY: