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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-85

5a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.
OG-5084

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name
2. Name of Operator Conoco Inc.	8. Farm or Lease Name State II-23
3. Address of Operator P. O. Box 460, Hobbs, New Mexico 88240	9. Well No. 3
4. Location of Well UNIT LETTER L , 1980 FEET FROM THE South LINE AND 1660 FEET FROM THE West LINE, SECTION 23 TOWNSHIP 10S RANGE 32E NMPM.	10. Field and Pool, or Wildcat Mescalero-San Andres
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Lea

16.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <u>repair csg, perforate</u> <input checked="" type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
OTHER <input type="checkbox"/>	

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1708.

MIRU. CO to 4265'. Spnt 65 gallons 15% NE-FE-HCL from 4169'-4255'. Run tracer survey. Bradenhead squeeze csg-csg annulus w/ 239 sxs class "H" cement. Perf. the following intervals w/ 2 JSPF for a total of 6 holes: 4184', 4235' & 4255'. Acidize w/ 756 gallons 15% NE-FE-HCL. Swab. Return well to production.

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

SIGNED *David A. Smyth* TITLE Administrative Supervisor DATE 11/27/84
APPROVED BY JERRY SEXTON TITLE DEPUTY SUPERVISOR DATE NOV 28 1984

RECEIVED

NOV 27 1984

U.S. DEPT. OF JUSTICE
HONORARY OFFICE