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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	State ☒ Fee ☐
5. State Oil & Gas Lease No.	B-1534

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. OIL WELL ☒ GAS WELL ☐ OTHER ☐	7. Unit Agreement Name
2. Name of Operator Conoco Inc.	8. Farm or Lease Name State 5-2
3. Address of Operator P.O. Box 460 - Hobbs, New Mexico 88240	9. Well No. No. 6
4. Location of Well UNIT LETTER <u>0</u> , <u>660</u> FEET FROM THE <u>south</u> LINE AND <u>1930</u> FEET FROM THE <u>east</u> LINE, SECTION <u>2</u> TOWNSHIP <u>22S</u> RANGE <u>36E</u> NMPM.	10. Field and Pool, or Wildcat Arrowhead Graydus
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Lea

10. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐ TEMPORARILY ABANDON ☐ PULL OR ALTER CASING ☐ OTHER ☐	PLUG AND ABANDON ☐ CHANGE PLANS ☐ REMEDIAL WORK ☐ COMMENCE DRILLING OPNS. ☐ CASING TEST AND CEMENT JOBS ☐ OTHER <u>CO. Open Add'l Pay & Acidizing</u> ☒

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 1103.

Work started 4/9/87. MIRR. POOH w/ rods & pump. Clean out cement 3841' to 3860'. Drill out CIBP at 3860'. Clean out liner to 3872'. Tag fill at 3872'. Run CCL-G-R from TD to top of lined. Perf 3648'-3826' w/ 2 js pf. Acidize w/ 30 bbls 15% HCL-NE-FE acid in 2 equal stages. Pump 150 bbls rock salt in 2 bbls gelled 10 ppq brine between stages. Flush w/ 25 bbls 9 ppq. Swab dry. POOH w/ phr. Set RBP at 3838. Acidize Upper Graydus w/ 50 bbls 15% HCL-NE-FE acid in 2 equal stages. Drop 70 lbs rock salt in 1 bbl gelled 10 ppq brine between stages. Flush w/ 25 bbls 9 ppq brine. Ran producing equipment. Work completed 4/21/87.

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

SIGNED DE FINNEY TITLE Administrative Supervisor DATE August 18, 1987

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR

APPROVED BY _____ TITLE _____ DATE AUG 21 1987

CONDITIONS OF APPROVAL, IF ANY:
none