| Submit 3 Copies To Appropriate District State of New Mexico Office District I 1625 N. French Dr., Hobbs NM 87240 DECENSED | S |
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| Submit 3 Copies To Appropriate District State of New Mexico Office District I | Form C-103 |
| Office District I | Revised March 25, 199 |
| 1625 N. French Dr., Hobbs NM 87240 RECEIVED ND RECEIVED CONSERVATION DIVISION | WELL API NO. 30-015-26314 |
| District III District III RECEIVED RECEIVED RECEIVED RECEIVED RECEIVED RECEIVED RECEIVED RECEIVED AND SERVATION DIVISION District III RECEIVED RECEIVED | 5. Indicate Type of Lease |
| 1000 Rio Brazos Rd., Aztec, NM 87505 | STATE 🗷 FEE 🗆 |
| District IV. 2040 South Pacheco, Santa Fe, NM 84505 57 87 17 36 | 6. State Oil & Gas Lease No. K-3271 |
| SUNDRY NOTICES AND REPORTS ON WELLS | 7. Lease Name or Unit Agreement Name: |
| (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. Type of Well: | JAMES A |
| Oil Well X Gas Well Other | |
| 2. Name of Operator | 8. Well No. |
| ConocoPhillips Company 3. Address of Operator | 9. Pool name or Wildcat |
| 4001 Penbrook Street, Odessa, TX 79762 | CABIN LAKE (DELAWARE) |
| 4. Well Location | |
| Unit Letter N : 660' feet from the SOUTH line and | 2310' feet from the WEST line |
| Section 2 Township 22-S Range 30-E | NMPM County EDDY |
| 10. Elevation (Show whether DR, RKB, RT, GR, etc. 3166' GR; 3173.5' RKB | .) |
| 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data | |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: | |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK | ☐ ALTERING CASING |
| TEMPORARILY ABANDON 🕱 CHANGE PLANS 🔲 COMMENCE DRILLII | |
| PULL OR ALTER CASING | ABANDONMENT |
| | |
| OTHER: 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation. | |
| 1. MIRU well service rig. ND wellhead and NU shop tested, Class 2 BOP and environmental tray. | |
| 2. RU cable spooler. TOOH w/2 7/8" tbg and submersible pump. Visually inspect tubing while pulling. | |
| If condition is good, use the as workstring. If not, lay down 2 7/8" tubing and FU 2 3/8" workstring. | |
| 3. TIH w/casing scraper to 5620' +/ TOOH w/csg scraper. | |
| 4. PU and TIH with 5 1/2" CIBP on workstring. Set CIBP at 5600'+/ | Notify OCD <u>24 hours</u> prior to test. 748-1283 |
| 5. Test casing and CIBP to 500 psig for 30 min. per NMOCD requirements. | |
| | |
| 6. Circulate well w/fresh water containing 1% corrosion inhibitor. TOOH & LD workstring 7. ND BOP and NU WH. RDMO well service rig. Clean location. Leave well in TA'd status. | |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. | |
| SIGNATURE CONTINUED TITLE Regulatory Assis | stant DATE 3/11/03 |
| Type or print name Alva Franco | Telephone No. (915) 368-1665 |
| | |
| APPROVED BY | O P MAR 2 5 2003 |
| Conditions of approval, if any. | |