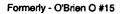
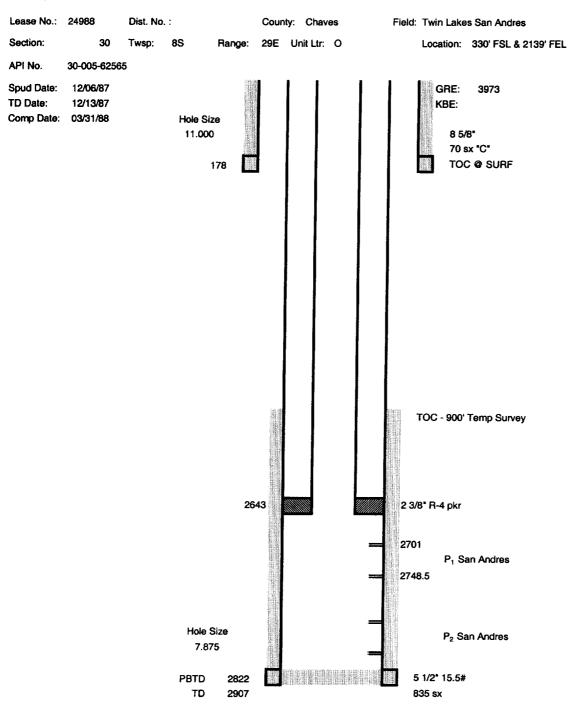
	- 184	
Submit 3 Copies To Appropriate District  Office  State of New Mexico  Office  France Minerals and Natural Resources	Form C-103  Revised March 25, 1999	
District I Energy, Minerals and Natural Resources 1625 N. French Dr., Hobbs, NM 88240	WELL API NO.	
District II	30005-62565	
811 South First, Artesia, NM 88210 OIL CONSERVATION DIVISION District III 2040 South Pacheco	5. Indicate Type of Lease	
1000 Pio Prozos Rd. Aztec NM 97410	STATE FEE	
District IV 2040 South Pacheco, Santa Fe, NM 87505  Santa Fe, NM 87505	6. State Oil & Gas Lease No.	
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	Twin Lakes San Andres Unit	
PROPOSALS.)	I will Lakes San Andres Offit	
1. Type of Well: Oil Well Gas Well Other Injection		
2. Name of Operator	7. Well No.	
Concho Oil & Gas Corp.	15	
3. Address of Operator	8. Pool name or Wildcat	
110 W. Louisiana Ste 410; Midland, Tx 79701	Twin Lakes; San Andres (Assoc)	
4. Well Location		
Unit Letter O: 330 Feet from the South line and 2139 fee	et from the <u>East</u> line	
Section 30 Township 8S Range 29E	NMPM Chaves County	
10. Elevation (Show whether DR, RKB, RT, GR, 6 3966 GL		
11. Check Appropriate Box to Indicate Nature of Notice	Report or Other Data	
	BSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WO		
TEMPORARILY ABANDON	RILLING OPNS. PLUG AND	
PULL OR ALTER CASING  MULTIPLE  CASING TEST A	ABANDONMENT	
COMPLETION CASING COMPLETION CASING TEST /		
OTHER: OTHER:		
12. Describe proposed or completed operations. (Clearly state all pertinent details, and		
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Atta	ch wellbore diagram of proposed completion	
or recompilation.  Conche Oil & Cas Corp. respectfully requests approval to plug and aba	ndon the TLSAU #15 well according to	
Concho Oil & Gas Corp. respectfully requests approval to plug and abandon the TLSAU #15 well according to the following procedure:		
Notify NMOCD Artesia 24 hrs prior to commencement of procedu	ıre.	
2. Set 459' cmt plug from 2650-2800'. WOC. Tag.		
1974		
4. Set 100' cmt plug @ 2020-2120'.	50	
5. Set 100' cmt plug @ <del>1610-17</del> 10'. 1400~1500'	32	
6. Cut csg @ 850' & POOH.	2	
7. Set 200' cmt plug @ 800-1000'. WOC. Tag.	21	
8. Circ cmt from 228' to surface.  9. Cut off wellhead & install dry hole marker.	567891011727	
/cer	. ex <sup>x</sup> /	
्ट्रेट्ट इंट्रहा था। इंट्रेट्टें	1917	
I hereby certify that the information above is true and complete to the best of my knowled	dge and helief	
I have been a file with a series of the best of the be		
SIGNATURE TITLE Production And	olyst DATE 9-28-01	
Type or print name Terri Stathem Telephone No 915	683-7443	
(This space for State use) APPPROVED BY  TITLE	DATE 10 - 12 - 01	
Conditions of approval. if any:		

## **TLSAU #15**





Original Perf Details: P1: 2701-2748.5 3600 gals 20% acid

Operator	Condition of the SA daily 15
Well	Section 30 Township 8 Range 29
Unit	30 -005-62565
API#	
•	
Ì	
	<ul> <li>Salt gel mud consisting of 10# brine with 25# of gel per barrel must be placed between each plug</li> <li>Install Dry Hole Marker</li> </ul>
	Notify OCD 24 hrs. prior to any work done
84 178' dic	L228' surface Plus - 228' to surface
850'	L'entifulless. 200' Plug 800'+0 1000 tas
900'	TOC Temp Survey
	· ·
	100' Plus 1400' to 1500'
	100' Plug 2020' to 2120'
2701 2748	Perfs 199' Plug 2601 to 2800' TAG
51/2 2833	