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NO. OF COPIES RECEIVED	13				RECEIVED		Form C-103		
DISTRIBUTION	 						Supersedes Ol C-102 and C-1		
SANTA FE	 	NE.	W MEXICO OIL	CONSER	EVATION DE MISSION OS		Effective 1-1-6		
FILE	1, 1	<u>-</u>		i	DE0 9 1301	r	7	-6 I	
U.S.G.S.	1				O , C, D	5a.	Indicate Type		ee. 🗍
LAND OFFICE							State 1		
OPERATOR	1,				ARTESIA, OFFICE	5.	State Oil & Ga		
				<u> </u>			F-742	mm	m
(DO NOT USE THIS F	SUN FOR	DRY NOTICES PROPOSALS TO DRILL CATION FOR PERMIT	AND REPORT	SON W	ELLS K TO A DIFFERENT RESERVOIR. PROPOSALS.)	7	Unit Agreemen	t Name	
1. OIL GAS WELL WELL		OTHER-					Farm or Lease		
2. Name of Operator CONOCO INC. /							State 1	9	
3. Address of Operator P. O. Box 460, Hobi	os. N.A	A. 88240) "	/		
4. Location of Well		11. 002-10		.). Field and Po		at
UNIT LETTER		1660 FEE	T FROM THE	with	_ LINE AND FE	ET FROM	Indesignas	PEA Abo	ımi
THE West	LINE, S	ECTION 19	TOWNSHIP	175	RANGE 29 E	NMPM.			
HIHIHIH	IIII	15.	Elevation (Show u	vhether D	F, RT, GR, etc.)	1	2. County Eddu		
VIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	77777								
16. NOT		ck Appropriate F INTENTION		cate Na	ture of Notice, Report SUBSE	or Uther	· Data REPORT OF	:	
[-		PLUG AND ABAND	on	REMEDIAL WORK		ALTE	RING CASING	
PERFORM REMEDIAL WORK	=		. ees nue nemie	_	COMMENCE DRILLING OPNS.		PLUG	AND ABANDON	MENT
TEMPORARILY ABANDON			CHANGE PLANS		CASING TEST AND CEMENT JOB		Ĺ	1 1	 -
PULL OR ALTER CASING			AUSHAR CPURA	ت	OTHER Squeeze ME	orrow ?	recomp	lete	
A*U**					70	•	•		
OTHER					i	naludina a	timated date of	starting and	y proposed
					ils, and give pertinent dates, i				
MIRU 10/1/2	31. 5	squeezed	Morrow u	ry 75	5x Class H cer	ment.	JPOTTEC	1 11	
m norm ok	~ 5	potted 253	sx plug br	om .	7732'-7432', KO	in GK	109. rei	o noc	wy
2 JSPF Loom	70	61-7070'	and 7098	-7104	4°. Set pkr 7028	s. Me	idize A	00 W/	
1700 gals 15	5%	HCL acid	. Ran pr	odu	ction equipme	ent. h	Jeare	testi	ing
this well as	446	is time.							·
1 ** · · ·								ę, i	
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								/1. T	$\mathcal{A} = \mathcal{A}_{\mathcal{F}}$
							1,3	S. C. W.	7.5
								1x x	
								~	
10 I hereby contifu that t	he infor	nation above is true	e and complete to	the best	of my knowledge and belief.				
to, I hereby certify that t		F					0	,	110-
SIGNED Win a- 1	Pull.	extuel	T1	TLE <u>Adm</u>	inistrative Supervisor	,	DATE	ecember	4148
10		4	11		SUPERVISOR, DISTRIC	T H	DATE	-C 7	1981
APPROVED BY	4	Linessit	*11	TLE			DATEU		IVU

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