

Submit 2 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department.

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

P.O. Box 2088
Santa Fe, New Mexico 87508

OCT - 4 1993

WELL API NO. 30-015-24157
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-8096

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. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Lease Name or Unit Agreement Name Conoco "7" State
2. Name of Operator Threshold Development Company	8. Well No. 11
3. Address of Operator 777 Taylor St, Suite II-D, Ft Worth, TX 76102	9. Pool name or Wildcat E Millman (Queen-Greyburg)
4. Well Location Unit Letter H : 1980 Feet From The North Line and 560 Feet From The East Line Section 7 Township 19 S Range 29 E NMMP Eddy County	10. Elevation (Show whether DF, RKB, RT, GR, etc.)


11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

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.

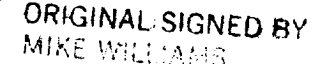
** See attached procedure

Anticipated Starting date is October 6th, 1993

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

SIGNATURE  TITLE Petroleum Engineer DATE 9/28/93
TYPE OR PRINT NAME Alan T Davis TELEPHONE NO. 817-870-1487

(This space for State Use)

APPROVED BY  TITLE SUPERVISOR, DISTRICT II DATE
CONDITIONS OF APPROVAL, IF ANY:

OCT 19 1993