

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

JUN 22 1992

O. C. D.
LEASES OFFICE

WELL API NO. 30-015-26185
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. LG-1525
7. Lease Name or Unit Agreement Name DEE STATE
8. Well No. 2
9. Pool name or Wildcat NO. DAGGER DRAW, UPPER PENN

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 ☐ GAS WELL ☐ OTHER ☐
2. Name of Operator CONOCO INC.
3. Address of Operator 10 Desta Drive STE 100W, Midland, TX 79705
4. Well Location Unit Letter M : 940 Feet From The SOUTH Line and 990 Feet From The WEST Line Section 36 Township 19 S Range 24 E NMPM 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 ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: ☐	PLUG AND ABANDONMENT ☐
	CASING TEST AND CEMENT JOB ☐
	OTHER: CLEAN OUT & TREAT ☒

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.

3-19-92 MIRU. POOH W/ PROD. EQUIP. RIH W/ 7" BIT & SCRAPER TO 8050' POOH.
RIH W/ 7" PKT TO 7858', SPOT 1800 GAL XYLENE POOH.
RIH W/ RBP TO 7665' SPOT 60 BBL SLURRY W/ 20% XYLENE POOH.
RIH W/ STRADDLE PKR ASSEMBLY W/ 30' SPACING-TREAT ZONES 7755-7838' W/ 1680 GAL XYLENE POOH
GIH W/ PRODUCTION EQUIP.
RDMO
RETURNED WELL TO PRODUCTION 4-8-92.
PRODUCING 676 BOPD, 706 BWPD, 856 MCFPD

I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE <u>Bill R. Keathly</u>	TITLE <u>SR REGULATORY SPEC.</u>
DATE <u>6-18-92</u>	TELEPHONE NO. <u>915-686-5424</u>
TYPE OR PRINT NAME <u>BILL R. KEATHLY</u>	

(This space for State Use)	
ORIGINAL SIGNED BY MIKE WILLIAMS SUPERVISOR, DISTRICT I	TITLE _____
APPROVED BY _____	DATE <u>JUN 29 1992</u>
CONDITIONS OF APPROVAL, IF ANY:	