

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

WELL API NO. 30-015-26672

5. Indicate Type of Lease STATE ☐ FEE ☒

6. State Oil & Gas Lease No. _____

7. Lease Name or Unit Agreement Name
CONOCO
Elyde Com.

8. Well No. 1

9. Pool name or Wildcat
North Dagger Draw Upper Penn.

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3553

MAR 28 1991

O. C. D.

ARTESIA, NM

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, Suite 100 W, Midland, TX 79705

4. Well Location
Unit Letter A : 710 Feet From The north Line and 660 Feet From The east Line
Section 18 Township 19S Range 25E NMPM Eddy County _____

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input checked="" type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER: _____ <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.

It is proposed to change the name of this proposed drilling well to:

Conoco Com. No. 1

Post ID-3
4-5-91
chg well name

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

SIGNATURE Serry W. Hoover TITLE Regulatory Coordinator DATE 3-27-91
(915)
TYPE OR PRINT NAME Serry W. Hoover TELEPHONE NO. 686-6548

(This space for State Use) ORIGINAL SIGNED BY MIKE WILLIAMS DATE APR 29 1991
APPROVED BY SUPERVISOR, DISTRICT II TITLE _____
CONDITIONS OF APPROVAL, IF ANY: _____