

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

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.
30015-29524

Indicate Type of Lease

STATE ☒

FEE ☐

State Oil & Gas Lease No.

K3633

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")

Type of Well:

OIL
WELL ☐

GAS
WELL ☒

OTHER

Name of Operator
Concho Resources Inc.

Address of Operator
110 W. Louisiana, Ste 410; Midland, Tx 79701 (915) 683-7443

Well Location

Unit Letter H : 2180 Feet From The North Line and 360 Feet From The East Line

Section 14 Township 21S Range 27E NMPM Lea County

Elevation (Show whether DF, RKB, RT, GR, etc.)
3188

Lease Name or Unit Agreement Name
Lone Tree '14' State Com

Well No.
1

Pool name or Wildcat
Bone Spring Carbonate

11

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ANBANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Set Int Csg & Prod Csg ☒

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.

12-23-97 RIH & Set 8-5/8" Intermediate csg @ 3095' w/ 2100 sxs Class C cmt. Follow w/ additional 75 sxs & circ to surf. wcc?
1-26-98 RIH & set 5-1/2" csg @ 9912' w/ 735 sxs Mod Super H + additives. Open DV tool & circ 67 sx cmt to surf. Cmt 2nd stage w/ 280 sxs
Class C Lite + additives. Follow w/ 10-0 sx Class C Neat + additives. DV tool closed. Release rig.

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

SIGNATURE

TITLE Production Analyst

DATE 03-02-99

TYPE OR PRINT NAME Terri Stathem

TELEPHONE NO. 915-683-7443

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: