

C/SF
OP

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.

30015-22243

Indicate Type of Lease

STATE ☒

FEE ☐

State Oil & Gas Lease No.

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.

Well No.

1

Address of Operator
110 W. LOUISIANA STE 410; MIDLAND, TX 79701

Pool name or Wildcat

Happy Valley Strawn

Well Location

Unit Letter k : 1980 Feet From The South Line and 1980 Feet From The West Line

Section 32 Township 21S Range 26E NMPM Eddy County

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

3280'GR

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 ABANDONMENT ☒

CASING TEST AND CEMENT JOB ☐

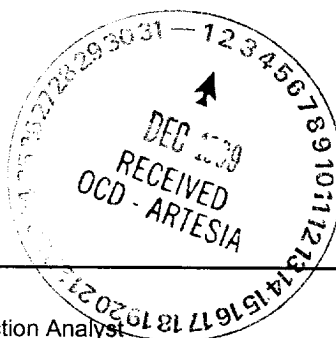
OTHER: ☐

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.

11-18-99 TIH w/ tbg to 9650'. Circ hole w/ mud. Spot 25 sx cmt @ 9650-9400'. Spot 25 sx @ 8400-8150'. Spot 25 sx @ 5857-5607'. Spot 25 sx cmt @ 4510-4360'. POH w/ tbg. Ran CIBP & set @ 4300'. Capped w/ 35 sx cmt. Ran tbg & spot 25 sx @ 2500'. POH w/ tbg.

11-19-99 Tag TOC @ 2262'. POH. Spot 25 sx C cmt @ 2262-2012'. TOC @ 2019'. Spot 25 sx cmt @ 1750-1595'. POH.

11-22-99 TOC @ 1578'. PUH to 570'. Spot 40 sx cmt @ 570-420'. Tag plug @ 412'. Spot 10 sx cmt @ 30' to surface. RD MO.



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

SIGNATURE

TITLE Production Analyst

DATE 12-01-99

TYPE OR PRINT NAME Production Analyst

TELEPHONE NO. 915-683-7443

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: