Submit 3 Copies to Appropriate

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

Revised 1-1-89

District Office		I DITIOTOR	
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION P.O. Box 2088		WELL API NO. 30-045-27912
DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210		5. Indicate Type of Lease STATE FEE X	
DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410			6. 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.)			7. Lease Name or Unit Agreement Name
i. Type of Well: Oil GAS WELL X	OTHER		FC Fee Com
2. Name of Operator			8. Well No.
Conoco Inc.			7
3. Address of Operator 3817 N. W. Expresswa	ay, Oklahoma City OK	73112	9. Pool name or Wildcat Basin Fruitland Coal
4. Well Location	90 Feet From The South	Line and 990	Feet From The West Line
Section 10	Township 29N Ray	nge 14W	NMPM San Juan County
	10. Elevation (Show whether I	OF, RKB, RT, GR, etc.)	
Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT			
PULL OR ALTER CASING CASING TEST AND C			EMENT JOB
OTHER: Notice of Change		OTHER:	
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.			
Effective July 1, 1991, Mesa Operating Ltd. Partnership will transfer operatorship of the subject well to Conoco Inc., 3817 N.W. Expressway, Oklahoma City, OK 73112.			
RECEIVEN			
Please contact Sonya Baker (405) 948-3100 if you have any questions.			
			JUN21 1991
			OIL CON. DIV dist. 3
I hereby caractly that the information above as true-and complete to the best of my knowledge and belief.			
SIONATURE OUL TO THE Sr. Oil & Gas Assistant DATE 6-17-91			
TYPE OR PRINT NAME Sonya Bak	er		TELEPHONE NO. 405-948-3100
(This space for State Use)	who J. Que	SUPERVISOR	DISTRICT # 3
CONDITIONS OF APPROVAL, IF ANY:	0		