

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. 30-045-11118
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. E 3374
7. Lease Name or Unit Agreement Name STATE COM L
8. Well No. 8
9. Pool name or Wildcat BLANCO MESAVERDE

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 N : 990 Feet From The SOUTH Line and 1650 Feet From The WEST Line Section 36 Township 32 N Range 11 W NMPM SAN JUAN County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 6322	

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: SIDETRACK COMPLETION ☒

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.

9-1-93 MIRU. DRILL OUT CMT FROM 5296 TO 5450' TD. CIRC CLEAN. CBL SHOWS TOC @ 5376'.
GIH W/ 3 3/8" GUNS W/ 6 SPF. PERF FROM 5390 TO 5422'.
9-30-93 GIH W/ 166 JTS 2 3/8" TBG SET @ 5396'. PUMP 1000g 10% HCL & 2000g 7.5% & 1.5% HCL
ACID @ 4 BPM. AVG PRESS 500 PSI. FLUSH W/ 68,700 SCE NITROGEN. SHUT IN WAITING ON
COMPRESSOR.
10-14-93 SET HEM COMPRESSOR. PUT WELL ON PRODUCTION.
10-18-93 TEST O BOPW, 5 BWPD, 2826 MCFPD @ 190# TBG PSI.

RECEIVED

OCT 26 1993

OIL CON. DIV.
DIST. 3

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

SIGNATURE Bill R. Keathly TITLE SR. REGULATORY SPEC. DATE 10-22-93
TYPE OR PRINT NAME BILL R. KEATHLY TELEPHONE NO. 915-686-5424

(This space for State Use)

Original signed by CHARLES CHOLSON DATE OCT 26 1993
APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: