

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. NA
5. Indicate Type of Lease STATE ☐ FEE ☐
6. State Oil & Gas Lease No. NA
7. Lease Name or Unit Agreement Name FC Fee Com
8. Well No. 4
9. Pool name or Wildcat NA
10. Elevation (Show whether DF, RKB, RT, GR, etc.) NA

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 Dr. Ste 100W, Midland, TX 79705	4. Well Location Unit Letter K : Feet From The Line and Feet From The Line Section 31 Township 32N Range 11W NMPM NA County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) NA			

11. 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 CEMENT JOB ☐	
OTHER: ☐		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.

Cancel the Application to Drill a well with the above indicated name and location.

ABANDONED LOCATION

RECEIVED

JAN 28 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 Jerry W. Hoover TITLE Sr. Conservation Coordinator DATE 1/26/93
TYPE OR PRINT NAME Jerry W. Hoover (915) 686-6548 TELEPHONE NO.

(This space for State Use)

APPROVED BY [Signature] TITLE SUPERVISOR DISTRICT # 3 DATE JAN 28 1993
CONDITIONS OF APPROVAL, IF ANY: