Submit 3 Copies To Appropriate District	State of New	Mexico	Form C-103
Office District I	Energy, Minerals and	Natural Resources	Revised March 25, 1999
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.
<u>District II</u> 811 South First, Artesia, NM 88210	OIL CONSERVAT	ION DIVISION	30-045-30462
District III	2040 South		5. Indicate Type of Lease
1000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NI		STATE FEE
District IV 2040 South Pacheco, Santa Fe, NM 87505	Sailla Fe, M	VI 0/303	6. State Oil & Gas Lease No.
SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement			
(DO NOT USE THIS FORM FOR PROPOS DIFFERENT RESERVOIR. USE "APPLIC PROPOSALS.)	ALC TO DOLL OR TO DEEDEN O	D DY LLO D LANGE TO .	Name:
1. Type of Well:		RECEIVED.	STATE COM F
Oil Well Gas Well	Other	OIL CON DIV	(D)
2. Name of Operator CONOCO INC.	· ·	g Divisor	. Well No.
3. Address of Operator			9. Pool name or Wildcat
P.O. BOX 2197, DU 3066 HO	USTON, TX 77252 Debra	Sittner Ozakas 100	BLANCO MESA VERDE
4. Well Location	OSTOTI, III 11232 Debia	Sittle: 742232-7100	BEANCO MESA VERDE
Unit Letter_J:1980_feet from the SOUTH line and _2210_feet from the EAST line			
Section 36 Township 32N Range 12W NMPM, SAN JUAN County, NM			
	10. Elevation (Show wheth	er DR, RKB, RT, GR, etc	c.)
6322 GR			
II. Check A	ppropriate Box to Indicat		
NOTICE OF INT			SEQUENT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	☐ ALTERING CASING ☐
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILL	ING OPNS. PLUG AND ABANDONMENT
PULL OR ALTER CASING	MULTIPLE	CASING TEST AND	
	COMPLETION	CEMENT JOB	
OTHER:		OTHER:	\boxtimes
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. For Multiple Completions: Attach well bore diagram of proposed completion or recompilation.			
04-17-2001 THIS WELL WAS SPUD AT 1:00 AM			
	CD 111 1.00 / H/X		
I hereby certify that the information	above is true and complete to	the best of my knowled	ge and belief.
SIGNATURE	TITI	LE AS AGENT FOR C	CONOCO DATE 08-23-2001
Type or print name DEBRA SITT	NER dsittner@trigon-shee	han.com	Telephone No. 970-385-9100 x125
(This space for State use) APPPROVED BY TITLE TITLE TOTAL STATE OF STATE USE SAS INSPECTOR, DIST. PARTY DATE			
APPPROVED BY	. का का का mease १. िका संग्राह	E DESTIT OR & GAS IN	Microsit and a Mood of Foot
Conditions of approval, if any:	1111	E	DATE