

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

CLSF  
Op

**OIL CONSERVATION DIVISION**

2040 Pacheco St.  
Santa Fe, NM 87505

**DISTRICT I**

P.O. Box 1980, Hobbs NM 88241-1980

**DISTRICT II**

P.O. Drawer DD, Artesia, NM 88210

**DISTRICT III**

1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO. 30-015-30020
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 22336
7. Lease Name or Unit Agreement Name CONOCO STATE
8. Well No. 3
9. Pool name or Wildcat DEVONIAN

**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 DISPOSAL

2. Name of Operator  
 ORYX ENERGY COMPANY

3. Address of Operator  
 P.O. Box 2880, Dallas, TX 75221-2880

4. Well Location  
 Unit Letter G : 1650 Feet From The NORTH Line and 1650 Feet From The EAST Line  
 Section 2 Township 22S Range 23E NMPM EDDY County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
 3908' GL

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: \_\_\_\_\_

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.

SPUD WELL 01/30/98 PETERSON DRILLING CO. RIG #3

RECEIVED  
OIL & GAS  
ARTESIA

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

SIGNATURE Stephen Fore TITLE PRORATION ANALYST DATE 05-07-98

TYPE OR PRINT NAME STEPHEN FORE TELEPHONE NO. 972-715-8020

(This space for State Use)

**ORIGINAL SIGNED BY TIM W. GUM  
DISTRICT II SUPERVISOR**

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE 5-11-98

CONDITIONS OF APPROVAL, IF ANY: