

District I  
1625 N. French Dr., Hobbs, NM 87240  
District II  
811 South First, Artesia, NM 87210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
2040 South Pacheco, Santa Fe, NM 87505

RECEIVED

NOV - 7 2003

OCD-ARTESIA

OIL CONSERVATION DIVISION

2040 South Pacheco  
Santa Fe, NM 87505

WELL API NO.

30-015-32377

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name  
Crow Flats "11" State Com

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  
Concho Resources Inc.

8. Well No. 2

3. Address of Operator 550 West Texas Avenue, Suite 1300  
Midland, Texas 79701

9. Pool name or Wildcat  
Diamond Mound-Morrow

4. Well Location

Unit Letter O : 660 feet from the South line and 1980 feet from the East line

Section 11 Township 16S Range 28E NMPM County Eddy

10. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3447 GR

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 ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOBS ☐

OTHER: Continue Spud ☒

12. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work). SEE RULE 1103. For Multiple Completions: Attach diagram of proposed completion or recompletion.

10-13-03 Day 22: PTD 9,800'. Extend starting hole. Made 1' of hole from 48' to 49'  
10-31-03 Day 23: Extend starting hole. Made 1' of hole from 49' to 50'.

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

SIGNATURE Brenda Coffman TITLE Regulatory Analyst

DATE 11/04/2003

Type or print name Brenda Coffman

Telephone No. (432)685-4373

(This space for State use)

ORIGINAL SIGNED BY TIM W. GUM  
DISTRICT II SUPERVISOR

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_

DATE

NOV 12 2003

Conditions of approval, if any: