Submit 3 Copies to Appropriate District Office

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

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

OIL CONSERVATION DIVISION
RECEIVED
90 MAY 18 AM 9 39

Form C-103
Revised 1-1-89

WELL API NO. 30-025-00384

5. Indicate Type of Lease STATE ☑ FEE ☐

6. State Oil & Gas Lease No. B-9683

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.)

7. Lease Name or Unit Agreement Name: Anderson Ranch Unit

1. Type of Well: OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator: Conoco Inc.

8. Well No. 2

3. Address of Operator: P.O. Box 460 - Hobbs, NM 88240

9. Pool name or Wildcat: Anderson Ranch Wolfcamp

4. Well Location
Unit Letter C : 660 Feet From The North Line and 1980 Feet From The West Line

Section 11 Township 16S Range 32E NMPM Lea County

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

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: Perf & stimulate	☑			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.

1. MIRU. Cleanout to ±9900'.
2. Perf w/4 JSPF 9735-46, 9756-64, 9782-96, 9817-25, 9833-38, 9850-53, 9856-60'. 212 shots total.
3. Set pkr @ ±9650. Acidize w/120 bbls 15% HCL-NE-FE acid. Flush. Swab back. Release pkr.
4. Run production equipment

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

SIGNATURE H. A. Ingram TITLE Conservation Coord. DATE 5/4/90

TYPE OR PRINT NAME H. A. Ingram TELEPHONE NO. 397-5800

(This space for State Use)

APPROVED BY Jerry Sexton TITLE DISTRICT 1 SUPERVISOR DATE MAY 16 1990

CONDITIONS OF APPROVAL, IF ANY: