

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised March 25, 1999

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

WELL API NO. 30025-34783
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: SOUTH SHOE BAR '10' STATE COM
8. Well No. 2
9. Pool name or Wildcat VACUUM ATOKA MORROW NORTH

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.
3. Address of Operator
110 W. LOUISIANA STE 410; MIDLAND TX 79701
4. Well Location

Unit Letter E : 1800 feet from the North line and 990 feet from the West line
Section 10 Township 17S Range 35E NMPM LEA County

10. Elevation (Show whether DR, RKB, RT, GR, etc.)
3964' 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 JOB ☐
- OTHER: SET CSG ☐

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 wellbore diagram of proposed completion or recompilation.

5/23/00 RIH w/ 8-5/8", 32#, ST&C csg & set @ 5009'. Cmted w/ Lead: 1470 sx 50/50 POZ C + additives, tail : 200 sx C Neat.
Circ 169 sx to surf. WOC 12 hrs.

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

SIGNATURE Terri Stathem TITLE Production Analyst DATE 06/01/00

Type or print name Terri Stathem Telephone No. 915-683-7443

(This space for State use)

APPROVED BY _____ TITLE ORIGINAL SIGNED BY DATE 10 2000

Conditions of approval, if any:

GARY WINK
FIELD REP. II

