

Submit 3 Copies To Appropriate District Office

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

State of New Mexico  
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION

2040 South Pacheco

Santa Fe, NM 87505

Form C-103  
Revised March 25, 1999

WELL API NO.

30-025-36391

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name  
Hornet State

8. Well No. 1

9. Pool name or Wildcat  
LaRica: Morrow, East (Gas)

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 550 West Texas Avenue, Suite 1300  
Midland, Texas 79701

4. Well Location

Unit Letter D : 760 feet from the North line and 660 feet from the West line

Section 3

Township 19S

Range 34E

NMPM

County Lea

10. Elevation (Show whether DR, RKB, RT, GR, etc.)  
4002 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 ☐

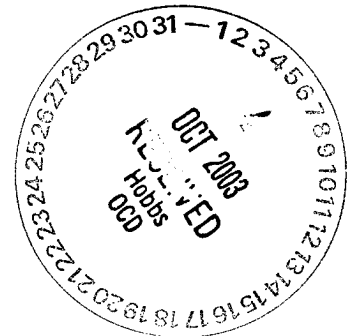
CASING TEST AND CEMENT JOBS ☒

OTHER: ☐

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.

9-13-03 Spud 17 1/2" hole.

9-14-03 Ran 10 jts. 13 3/8" 48# H-40 ST&C csg set @ 910.50'. Ran 10 centralizers & cmt'd w/500 sx Poz C + 6% gel + .2% CaCl + 1/4 PPS CF & tailed in with 300 sx Cl C + 2% CaCl2. WOC 24 hrs. Cement circulated to surface.



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 10/01/2003

Type or print name Brenda Coffman

Telephone No. \_\_\_\_\_

(This space for State use)

APPROVED BY Harry W. Wink TITLE OC DISTRICT SUPERVISOR/GENERAL MANAGER DATE \_\_\_\_\_

Conditions of approval, if any:

OCT 07 2003