Submit 3 Copies To Appropriate District Office	State of New Mexico				Form C-103
District I 1625 N. French Dr., Hobbs, NM 87240	Energy, Minerals and Natural Resources			WELL API NO.	Revised March 25, 1999
District II	OH CONGERNATION DIVIGION				30-025-36390
strict III 2040 South Pacheco			5. Indicate Type of		
1000 Rio Brazos Rd., Aztec, NM 87410 District IV Santa Fe, NM 87505			STATE L 6. State Oil & G		
2040 South Pacheco, Santa Fe, NM 87505				o. State On & C	as Lease 140.
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 X Gas Well Other				7. Lease Name or Tres Papalotes	Unit Agreement Name
2. Name of Operator Concho Resources Inc.				8. Well No. 1	
3. Address of Operator 550 West Texas Avenue, Suite 1300 Midland, Texas 79701				9. Pool name or Wildcat Wildcat; Upper Penn	
4. Well Location					
Unit Letter. Lot2	feet from the	North	line and <u>198</u>	0 feet from	m the East line
Section 4	Township 15S	Ra	inge 34E	NMPM	County Lea
	10. Elevation (Show wh	ether DR,	RKB, RT, GR, etc.)		
11 Chaok As	4114' GR opropriate Box to Ind	icata Na	sture of Notice I	Panort or Other I) ata
NOTICE OF IN PERFORM REMEDIAL WORK				SEQUENT RE	
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRI	LLING OPNS.	PLUG AND X
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING TEST AN CEMENT JOBS	ND	ABANDONMENT
OTHER:			OTHER:		
 12. Describe proposed or complete of starting and proposed work) or recompletion. Note: Plugging approval by Chris Cmt'd w/420 sx "C" + 2% CaCl Ta Well P & A'd. 10-5-03 Skid rig 50' West to begin WELL #1 P&A'D 	SEE RULE 1103. For M Williams on 10/03/03 gged @ 1153 - 855, 75 sx drilling Well #1Y.	MISSION RIOR TO	ompletions: Attach @ 855 - 790', 75 sx I MUST BE NOTIFI O THE BEGINNIN ATIONS FOR THE	diagram of propose "C" @ 525 - 420', a	d completion
I hereby certify that the information	n above is true and compl	ete to the	best of my knowled	dge and belief.	
SIGNATURE SIGNATURE	Comman	_TITLE_	Regulatory Analyst		DATE 10/08/2003
Type or print name Brenda Coffma	n			Tele	phone No.
(This space for State use)	1.1				AANIA CEP
APPROVED BY Yary W. Conditions of approval, it any:	Wink	_TITLEC	DISTRICT SUPERV	VISOR/GENERAL A	DATE OCT 1 6 200