Subrifit 3 Copies To Appropriate District Office	State of New Mex			Form C-103
District I	Energy, Minerals and Natur	al Resources	WELL API NO.	Revised March 25, 1999
1625 N. French Dr., Hobbs, NM 87240 District II			WELL AFINO.	30-025-36391
811 South First, Artesia, NM 87210	South First, Artesia, NM 87210 OIL CONSERVATION DIVISION		5. Indicate Type of	of Lease
District III 2040 South Pacheco 1000 Rio Brazos Rd., Aztec, NM 87410		STATE 2	X FEE 🗆	
District IV	Santa Fe, NM 875	505	6. State Oil & G	as Lease No.
2040 South Pacheco, Santa Fe, NM 87505				
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			Hornet State	r 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			Pool name or Wildcat LaRica; Morrow, East (Gas)	
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 Di 4002	R, RKB, RT, GR, etc.)		
	ppropriate Box to Indicate N			
NOTICE OF INPERFORM REMEDIAL WORK	TENTION TO: PLUG AND ABANDON	SUE REMEDIAL WOR	BSEQUENT RE RK □	PORT OF: ALTERING CASING [
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DR	ILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST A CEMENT JOBS	ND X	ADAM DOMINET
OTHER:		OTHER:		
 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. 10-4-03 In12 1/4" hole, ran 125 jts. 8 5/8" 32# J-55 HCK Csg. set @ 5173.68'. Cmt'd first stage w/600 sx 50/50:10 Poz C, Gel w/5% salt, 5# Gilsonite, 1/4# Flocele, tail in with 200 sx C Neat. Circ 150 sx cmt to pit. Cmt'd 2nd stage w/1150 sx 50/50;10 Poz C Gel w/5% salt, 5# Gilsonite, 1/4# Flocele, Tail w/200 sx Cl. C w/2% CaCl2. Circ. 178 sx cmt to pit. WOC 24 hrs. 				
			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	75 70 29 30 37 20 30 30 37 20 30 30 30 30 30 30 30 30 30 30 30 30 30
I hereby certify that the information above is true and complete to the best of my knowledge and belief.				
SIGNATURE DAMAG	Ofemantitle	E Regulatory Analyst	t	DATE 11/24/2003
Type or print name Brenda Coffma	m		Tele	phone No.
(This space for State use)	11 1 DE NICTAI	PT PLEATER		DEL: 11 2002
APPROVED BY				