Submit 3 Copies To Appropriate District Office	State of New Mexico			Form C-103 Revised March 25, 1999	
District I 1625 N. French Dr., Hobbs, NM 88240	Energy, Minerals and Natural Resources			WELL API NO.	Revised Water 23, 1999
District II 811 South First, Artesia, NM 88210	OIL CONSERVATION DIVISION			30025-35597	
District III	2040 South Pacheco			5. Indicate Type STATE	FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505				Gas Lease No.
2040 South Pacheco, Santa Fe, NM 87505				V4674	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A				7. Lease Name of	or Unit Agreement Name:
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)				Sundown State	
1. Type of Well: Oil Well Gas Well Other Injection					
2. Name of Operator				7. Well No.	
Concho Oil & Gas Corp.					2
3. Address of Operator				8. Pool name o Undes. San Andr	
110 W. Louisiana Ste 410; Midlan 4. Well Location	a, 1x /9/01			Oliues. Sall Aliui	
4. Well Education					
Unit Letter M: 660	<del></del>		e and 660 feet	from theWe	<del></del>
Section 14	Township		Range 37E	NMPM	Lea County
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 3940 GL					
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	N $\square$	REMEDIAL WORK	<b>(</b>	ALTERING CASING
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRIL	LING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING TEST AN CEMENT JOB	ID	./
OTHER:			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.					
12-21-01 RIH w/ 5-1/2", 1	5.5#, J55 LT&C csg & s	et @ 5150'.	. Cmt w/ 600 sx 50/	/50 PoZ 'C' 10% g	gel + additives Follow w/
630 sx 50/50 Poz C 2% gel + additives. Release rig @ 4:00 PM.					
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				18	
				18	
					20/2
I hereby certify that the information above is the and complete to the best of my knowledge and belief.					
SIGNATURE	Mith	TITLE	Production Anal	vstDATE_	1-3-01
Type or print name Terri Stat	hem	7	Telephone No. 915/	683-7443	
(This space for State use)			WIND EKA	JITZ	
APPPROVED BY		TITLE	BUTERI FUN E	NOWEEH	LADATERY COOK
Conditions of approval, if any:			PETRUME		JAN CHIL