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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-85

5a. Indicate Type of Lease	State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
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5. State Oil & Gas Lease No.

B-9683

## 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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name Anderson Ranch Unit
2. Name of Operator Conoco Inc.	8. Farm or Lease Name Anderson Ranch Unit
3. Address of Operator P. O. Box 460, Hobbs, New Mexico 88240	9. Well No. 12
4. Location of Well UNIT LETTER <u>V</u> <u>660</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM THE <u>West</u> LINE, SECTION <u>2</u> TOWNSHIP <u>16S</u> RANGE <u>32E</u> NMPM.	10. Field and Pool, or Wildcat Wolfcamp
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <u>acidize</u> <input checked="" type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1708.

MIRU. CO to 9864'. Set RBP @ 9690' & pkr @ 9864'. Spot 181 gals 10% acetic acid from 9861'-9880'. Set pkr @ 9600'. Acidize Wolfcamp w/total of 2310 gals 15% MCA acid & 282 gals blocking agent. Flush w/61 bbls. 2% KCL. Swab. Rel pkr & RBP. Run prod. equipment. Pmpd 25 BO, 4 BW & 144 MCF on 11/23/84

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

SIGNED David D. Smylie TITLE Administrative Supervisor DATE 1/3/85

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

TITLE \_\_\_\_\_ DATE JAN - 8 1985

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JAN -7 1985

O.C.D.  
HOBBS OFFICE