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LAND OFFICE	
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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. <b>B-9683</b>
7. Unit Agreement Name <b>Anderson Ranch Unit</b>
8. Farm or Lease Name <b>Anderson Ranch Unit</b>
9. Well No. <b>3</b>
10. Field and Pool, or Wildcat <b>Anderson Ranch Wolfcamp</b>
12. County <b>Lea</b>

**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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <b>INT well</b>
2. Name of Operator <b>CONOCO INC.</b>
3. Address of Operator <b>P. O. Box 460, Hobbs, N.M. 88240</b>
4. Location of Well UNIT LETTER <b>A</b> <b>660</b> FEET FROM THE <b>North</b> LINE AND <b>660</b> FEET FROM THE <b>East</b> LINE, SECTION <b>11</b> TOWNSHIP <b>16S</b> RANGE <b>32E</b> N.M.P.M.
15. Elevation (Show whether DF, RT, GR, etc.)

16. 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 JOBS <input type="checkbox"/>	OTHER <b>Temporarily Abandon</b> <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 1103.

**MIRU on 8/21/85. Set CIBP @ 9656'. Pressure test to 500 psi. Temporarily shut-in.**

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

SIGNED <b>Kevin L. Vogel</b>	TITLE <b>Administrative Supervisor</b>	DATE <b>9-19-85</b>
ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR		DATE <b>SEP 24 1985</b>
APPROVED BY <b>Robert L. Sexton</b>	TITLE <b>District I Supervisor</b>	

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SEP 28 1985

G.C.P.  
HOUSE OFFICE