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OPERATOR		

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 ☐ *Fed*. Fee ☐
5. State Oil & Gas Lease No.
LC-029509B

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 ☐   GAS WELL ☐   OTHER- *Injection Well - Water*

7. Unit Agreement Name
McA Unit

2. Name of Operator
Conoco Inc.

8. Farm or Lease Name
McA Unit Btry 3

3. Address of Operator
P. O. Box 460, Hobbs, N. M. 88240

9. Well No.
39

4. Location of Well
UNIT LETTER *F*, *1980* FEET FROM THE *North* LINE AND *1980* FEET FROM
THE *West* LINE, SECTION *22* TOWNSHIP *17S* RANGE *32E* NMPM.

10. Field and Pool, or Wildcat
Mdy. Gunfarey SA

15. Elevation (Show whether DF, RT, GR, etc.)
3995' DF

12. County
Lea

16.
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 ☐   REMEDIAL WORK ☐   ALTERING CASING ☐

TEMPORARILY ABANDON ☐   COMMENCE DRILLING OPNS. ☐   PLUG AND ABANDONMENT ☐

PULL OR ALTER CASING ☐   CHANGE PLANS ☐   CASING TEST AND CEMENT JOB ☐

OTHER _____ ☐   OTHER *Return to injection*   ☒

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.

This is to inform you that the referenced well was placed back on injection 2-1-88.

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

SIGNED *DF Finney*   TITLE *Administrative Supervisor*   DATE *2-17-88*

Orig. Signed by
Paul Kautz
Geologist

APPROVED BY _____   TITLE _____   DATE _____

CONDITIONS OF APPROVAL, IF ANY: