

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.

30-025-0069

5. Indicate Type of Lease

Federal

STATE ☐

FEE ☐

6. State Oil & Gas Lease No.

LC-068697B

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

Injection

2. Name of Operator

Conoco Inc.

3. Address of Operator

P.O. Box 460 - Hobbs, NM 88240

4. Well Location

Unit Letter L : 1980 Feet From The South Line and 660 Feet From The West Line

Section

25

Township

17S

Range

32E

NMPM

Dea

County

7. Lease Name or Unit Agreement Name

MCA Unit Btg 4

8. Well No.

#190

9. Pool name or Wildcat

Maljama GSA

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Temporary Abandonment ☒

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.

9-15-89 Set RBP@ 3600' and tested csg. to 500 psi
for 15 mins - held. Top off csg. w/pkr. fluid.

Chart attached

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

SIGNATURE

Mike Zimmerman

W.W. Baker

TITLE

Adm. Supervisor

DATE

Oct 9, 1989

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

OCT 16 1989

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

TA expires 10-1-90

RECEIVED

OCT 13 1989

**OCB
HOBBS OFFICE**

