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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 ☒ Leased Fee ☐
5. State Oil & Gas Lease No.

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 <u>Injection Well</u>	7. Unit Agreement Name <u>MCA Unit</u>
2. Name of Operator <u>Conoco Inc.</u>	8. Farm or Lease Name <u>MCA Unit Bty 3</u>
3. Address of Operator <u>P.O. Box 460 - Hobbs, New Mexico 88240</u>	9. Well No. <u>121</u>
4. Location of Well UNIT LETTER <u>B</u> , <u>660</u> FEET FROM THE <u>north</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE, SECTION <u>27</u> TOWNSHIP <u>17S</u> RANGE <u>32E</u> NMPM.	10. Field and Pool, or Wildcat <u>Maljamar G-SA</u>
15. Elevation (Show whether DF, RT, GR, etc.)	12. County <u>Lea</u>

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

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐
OTHER Convert to Cased Hole ☒

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

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.

Work started on 9/29/88. MURU. Test casing to 200 psi, held okay. Clean out & jet wash 3765'-4023'. Ran OH calipers from 3765'-3957'. G1H w/ 2 3/8" OF WS. Pickle Hg w/ 15% HQC-NE-FE. Spot 15 bbl acid 3765'-4023'. Resin pack w/ 63 bbl. G1H w/ bit & DO resin from 3386'-4023'. Drill out formation & cement from 4023'-4096'. Underream 3770'-3954'. Run liner to 4092' & cement w/ 120 sacks 50/50 Pozmix C-cement. Test casing & liner to 1000 psi, held okay. Ran GR-CBH 3300'-4076'. Perf 7th zone w/ 2 ss pF 3902'-4030'. Perf 6th zone w/ 2 ss pF 3786'-3872'. Retrieve plug. Place well in injection.

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

SIGNED Jerry Sexton TITLE Administrative Supervisor DATE November 14, 1988

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

NOV 17 1988