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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 ☐ Federal ☐ Fee ☐
5. State Oil & Gas Lease No.
LC-057210

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	7. Unit Agreement Name MCA
2. Name of Operator Conoco Inc.	8. Farm or Lease Name MCA Unit Bty 3
3. Address of Operator P.O. Box 460 - Hobbs, New Mexico 88240	9. Well No. 180
4. Location of Well UNIT LETTER L, 1980' FEET FROM THE SOUTH LINE AND 660 FEET FROM THE WEST LINE, SECTION 27 TOWNSHIP 17 S RANGE 32 E NMPM.	10. Field and Pool, or Wildcat Maljamar G-SA
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:

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

PLUG AND ABANDON ☐
CHANGE PLANS ☐

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

OTHER "PUDDLE PACK" ☒

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 1703.

RU. NU. BOP. POOH W/INJECTION EQUIPMENT.
TEST 4 1/2" CASING, CLEAN OUT OPEN HOLE TO TD(4170'), RUN OH CALIPER AND INJECTION PROFILE SURVEY. PUDDLE PACK FROM 4170' TO 3870' IF NECESSARY, PREPARE WELLBORE FOR RESIN SLURRY REPLACEMENT. IF NECESSARY, RESIN PACK OPEN HOLE INTERVAL FROM 4170'-3870' IF INJECTION SURVEY SHOWS LOSS @ SHOE, SQUEEZE W/ 50 SX5 CLASS "H" THIXOTROPK W/2% CACL2 & 10 LBS. / SX CAC SEAL FOLLOWED W/ 75 SX5 CLASS "C" W/2% CACL2. PUMP AT 1BPM MAXIMUM DRILL OUT CEMENT + RESIN PACK. REPLACEMENT FIBERGLASS LINER W/ 50/50 POZ MIX CLASS "C" W/0.45 GPS D64 & 0.7% CACL2 @ 1-2 BPM. PREPARE WELLBORE + LOG WELL FROM 4150'-3200' W/CBL-GR-CCL LOG. PERFORATE FROM 4080' 3844' (157 PERFS). ACIDIZE 6TH, 7TH, & 9TH PAY W/ 75 LBS 15% HCL-NO-FE MIXED W/ 125 GAL CHECKER-SOL MICELLAR SOLVENT (79 LBS TOTAL ACID SOLVENT) RETURN TO INJECTION.

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

SIGNED D.F. Finney TITLE Administrative Supervisor DATE 9/9/88
Orig. Signed by Paul Kautz Geologist
APPROVED BY Paul Kautz TITLE Geologist DATE SEP 14 '88

CONDITIONS OF APPROVAL, IF ANY:

NMOCD - Hobbs (6)

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SEP 13 1988

OCD
HONORS OFFICE