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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 ☐ Fed ☒ Fee ☐

5. State Oil & Gas Lease No.

LC-029410 A

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- Injection                                                                                                                      | 7. Unit Agreement Name<br>MCA                   |
| 2. Name of Operator<br>Conoco Inc.                                                                                                                                                                           | 8. Farm or Lease Name<br>MCA Unit Bty 2         |
| 3. Address of Operator<br>P.O. Box 460 - Hobbs, New Mexico 88240                                                                                                                                             | 9. Well No.<br>213                              |
| 4. Location of Well<br>UNIT LETTER <u>MA N</u> , <u>660</u> FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM<br>THE <u>West</u> LINE, SECTION <u>29</u> TOWNSHIP <u>17-S</u> RANGE <u>32-E</u> NMPM. | 10. Field and Pool, or Wildcat<br>Maljamar G-SA |
| 15. Elevation (Show whether DF, RT, CR, etc.)                                                                                                                                                                | 12. County<br>Lea                               |

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 "Puddle Pack" <input checked="" type="checkbox"/> | CASING TEST AND CEMENT JOBS <input 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.

- 1) Test 4 1/2" casing to 2000 psi, repair if necessary.
- 2) Clean out OH to TD.
- 3) Resin pack OH from 4020' - 3850'.
- 4) Drill out resin slurry to 3825' if necessary.
- 5) Squeeze 4 1/2" casing shoe w/75 sxs 50/50 Pozmix Class C
- 6) Drill out cement and resin to TD. Drill new hole to 4210'.  
Run GR-SNP-CAL from 4210' - 3839'.
- 7) Underream from 3800' - 3850'.
- 8) Run and cement liner bore receptacles, 29 jts 2 7/8" fiberglass liner, and seal bore extension with 100 sxs 50/50 Pozmix Class C w/0.75% Halad-4-Modified.
- 9) Perforate 3880' - 4126' w/424 perfs. Acidize w/3000 gals 15% HCL-NE-FE.
- 10) 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 2/23/88

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT SUPERVISOR

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE FEB 23 1988

CONDITIONS OF APPROVAL, IF ANY:

NMOCD (4)

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