

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
811 South First, Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised March 25, 1999

OIL CONSERVATION DIVISION  
2040 South Pacheco  
Santa Fe, NM 87505

WELL API NO.  
30025-35228

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement  
Name:

MORTON SOLID STATE UNIT

8. Well No.

4

9. Pool name or Wildcat  
Tres Papalotes Penn

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

2. Name of Operator

CONCHO RESOURCES INC.

3. Address of Operator

110 W. LOUISIANA STE 410; MIDLAND TX 79701

4. Well Location

Unit Letter 3 : 660 feet from the NORTH line and 1980 feet from the WEST line

Section 4 Township 15S Range 34E NMPM LEA County

10. Elevation (Show whether DR, RKB, RT, GR, etc.)  
4118' GR

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 ☐ MULTIPLE COMPLETION ☐

OTHER:

☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: WELL NAME CHANGE ☒

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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Please correct the lease/well name and well number according to the following:

**New Well Name: Morton Solid State #4**

Old Well Name: Morton Solid 4 State #2 - Original plat was sent to you with the incorrect information.

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

SIGNATURE Terri Statham TITLE Production Analyst DATE 01/03/00

Type or print name Terri Statham Telephone No. 915-683-7443

(This space for State use)

APPROVED BY Terri Statham TITLE Production Analyst DATE 01/03/00

Conditions of approval, if any: