

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTAFE		
FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

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-060329

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 Well - Water

2. Name of Operator
Conoco Inc.

3. Address of Operator
P.O. Box 460, Hobbs, N.M. 88240

4. Location of Well
UNIT LETTER P 660 FEET FROM THE South LINE AND 660 FEET FROM
THE East LINE, SECTION 17 TOWNSHIP 17S RANGE 32E N.M.P.M.

7. Unit Agreement Name
MCA Unit

8. Farm or Lease Name
MCA Unit Bldg. 1

9. Well No.
246

10. Field and Pool, or Wildcat
Majors GSA

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: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK
TEMPORARILY ABANDON
P.L. OR ALTER CASING
OTHER _____

PLUG AND ABANDON
CHANGE PLANS

REMEDIAL WORK
COMMENCE DRILLING OPNS.
CASING TEST AND CEMENT JOBS
OTHER Notice of Shut in Water Injection Well

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 1703.

This is to inform you that the referenced well was shut in 2-9-89, not economical to operate at this time.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.
SIGNED Mahine Simpson TITLE Admin. Supervisor DATE 2-16-89

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR TITLE _____ DATE FEB 21 1989
CONDITIONS OF APPROVAL, IF ANY: