NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
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-058697B

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

7. Unit Agreement Name: MCA

2. Name of Operator: Conoco Inc.

8. Farm or Lease Name: MCA Unit Btry 4

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

9. Well No.: 198

4. Location of Well: UNIT LETTER L, 1980 FEET FROM THE South LINE AND 660 FEET FROM THE West LINE, SECTION 30 TOWNSHIP 17S RANGE 33E NMPM.

10. Field and Pool, or Wildcat: Maljamar GSA

15. Elevation (*Show whether DF, RT, GR, etc.*): 4038' DF

12. County: Lea

13. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐		COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	CHANGE PLANS ☐	CASING TEST AND CEMENT JOB ☐	
OTHER ☐		OTHER Notice of Shut in Water Injection Well ☒	

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.

This is to inform you that the referenced well was shut in 7-14-86 due to high surface injection pressure.

24 hr 8/26/87

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

SIGNED Kim L Lloyd TITLE Administrative Supervisor DATE 8-19-86

APPROVED BY Orig. Signed by Paul Kautz Geologist TITLE _____ DATE AUG 26 1986

CONDITIONS OF APPROVAL, IF ANY: