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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 <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. B-2656

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 - 1" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Conoco Inc.	8. Farm or Lease Name STATE A-33
3. Address of Operator P. O. Box 460, Hobbs, New Mexico 88240	9. Well No. 12
4. Location of Well UNIT LETTER L , 2175 FEET FROM THE SOUTH LINE AND 625 FEET FROM THE WEST LINE, SECTION 33 TOWNSHIP 18-S RANGE 38-E NMPM.	10. Field and Pool, or Wildcat DRINKARD
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 <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 OPER. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> OPEN ADD'L PAY, STIMULATE	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <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 1703.

MIRU. REL PKR @ 6570'. CO TO 6978'. SPOT 10 BBLs
15% HCL-NE-FE 6650'-6950'. PERF w/2 JSPF @
6686'-6700', 6706'-11', 16'-20', 38'-46', 70'-80', 6838'-48', 74'-78',
90'-98', 6906'-10', + 6930'-6946' (TOTAL 166 PERFS). SET PKR
@ 6600'. TREAT PERFS w/166 BBLs 15% HCL-NE-FE, 6 BBLs
TREATED BRINE w/1 1/2 PPG ROCKSALT, 1 PPG BENZOIC ACID, +
GUAR GUM. FLUSH w/40 BBLs TFW. SWAB. INHIBIT
w/2 DRUMS CHEMICAL IN 26 BBLs TFW. FLUSH w/320
BBLs TFW. RUN PROD EQUIP. TEST.

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

SIGNED Wm A. Dutton TITLE Administrative Supervisor DATE 12/21/83
ORIGINAL SIGNED BY LEOBY CRYSTON