			Form C-103
DISTRIBUTION			Supersedes Old
SANTA FE	NEW MEXICO OIL CON	SERVATION COMMISSION	C-102 and C-103 Effective 1-1-65
FILE		Z. C. F. C.	FireGuae 1-1-02
U.S.G.3.			5a. Indicate Type of Lease
LAND OFFICE			State Fee
OPERATOR	-		5. State Cil & Gas Lease No.
			E-2519
SUNDE	V MOTICES AND DEPOSIT		Arminini Amm
OO NOT USE THIS FORM FOR PRO	Y NOTICES AND REPORTS ON	WELLS	
1.	ION FOR PERMIT - FORM C-101) FOR SUI	H PROPOSALS.)	
OIL GAS			7. Unit Agreement Name
2. Name of Operator	OTHER-		
CONOCO II	NC.		8, Form or Lease Name
3. Address of Operator			E-K Deep
P. O. Box 460, Hobbs, N.M. 88240			9. Well No.
	7, 111111111111111111111111111111111111		/
4. Location of Well		1	10. Field and Pool, or Wilden
UNIT LETTER M. 715 PEET PROM THE SOUTH LINE AND 990 FEET PROM			10. Field and Pool, or Wildow Undersignated Bone Samp Vndesignated Worrow
, ,	-		
THE WEST LINE, SECTION	on 22 TOWNSHIP 185	RANGE 34E NMPM.	
		TAMPM.	
	15. Elevation (Show whether	DF, RT, GR, etc.)	12. County
			Lea IIIIIII
Check	Appropriate Box To Indicate	lature of Notice, Report or Otl	
NOTICE OF IN	ippropriate box to indicate in		
NOTICE OF IN	TENTION TO:	SUBSEQUENT	REPORT OF:
PERFORM REMEDIAL WORK			
	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		COMMENCE DRILLING OPHS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CENENT JOB	
		OTHER	Intermed. Casing 1
OTHER)
17. Describe Proposed or Completed Op	erations (Clearly state all postinose des	ails and sing parties a feet in the	
worm, 512 NOCE 1103,			
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1) Set 94 jts, 958 1) Cont W/ 1435 s		Intermed, casing @ 1 w/ 300 sxs class	
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1) Set 94 jts,9% 2) Cmt w/1435 si to Surface	", 36 # K-55 ST&C KS Class "C" & tail-in	Intermed, casing @ 1 w/ 300 sxs class	
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1) Set 94 jts,9% 2) Cmt w/1435 si to Surface	", 36 # K-55 ST&C KS Class "C" & tail-in	Intermed, casing @ 1 w/ 300 sxs class	4022' on 12-26-85 C", Circ. 400 sxs
1) Set 94 jts,9% 2) Cmt w/1435 si to Surface	", 36 # K-55 ST&C KS Class "C" & tail-in	Intermed, casing @ 1 w/ 300 sxs class	
D Set 94 jts, 998 D Cont w/ 1435 si to Surface 18. I hereby certify that the information SIGNED Low L. C.	above is true and complete to the best of	Intermed, casing @ 1 w/300 sxs class	4022' on 12-26-85 C", Circ. 400 sxs
18. I hereby certify, that the information ORIGINAL SIGNED BY	above is true and complete to the best of the sexton	Intermed, casing @ 1 w/300 sxs class	4022' ON 12-26-85 C", CIrc, 400 SXS
D Set 94 jts, 998 D Cont w/ 1435 si to Surface 18. I hereby certify that the information SIGNED Low L. C.	above is true and complete to the best of the sexton	Intermed, casing @ 1 w/300 sxs class	4022' on 12-26-85 C", Circ. 400 sxs

JAN 3- 1986