

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.

30-025-28046

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

B-3196

7. Lease Name or Unit Agreement Name

State H-35

8. Well No.

14

9. Pool name or Wildcat

Vacuum GSA

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
Conoco Inc.

3. Address of Operator
P. O. Box 460 - Hobbs, NM 88240

4. Well Location

Unit Letter H : 1345 Feet From The north Line and 1210 Feet From The east Line

Section 35

Township 17S

Range 34E

NMPM

County Lea

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

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 ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Stimulate ☒

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.

Work started 11/1/88. M/R/L. Pull rods & pump & Abq. G/H at 20', esq
Scraper & Abq. Clean out to 475' & cure hole clean. P/O/H. G/H at Baker
mud at 465'. Load backside. Pumped 26 bbls acid. Empd 5 bbls
acid w/40# HEC & 150# rocksalt, pump 30 bbls acid at 4.2 BPM & 1400
psi, pumpd 30 bbls completion fluid. Surb well. Scale squeeze
pump w/2 drums Nalco 952 & 2 gals Udonal mixed w/50 BFA.
Flush w/100 bbls comp fluid. P/O/H at pke & Abq. G/H at producing
equipment & place on production. Work completed 11/30/88.

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

Administrative Supervisor

SIGNATURE

TITLE

DATE

January 16, 1989

TYPE OR PRINT NAME

D. F. Finney

TELEPHONE NO.

(505) 397-5800

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

JAN 19 1989

CONDITIONS OF APPROVAL, IF ANY:

nmccw. Hobbs (3) File