

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.	
300250561200	
5. Indicate Type of Lease	
STATE <input checked="" type="checkbox"/>	FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	
B-2656	
7. Lease Name or Unit Agreement Name	
State A-17	
8. Well No.	
3	
9. Pool name or Wildcat	
Eumont Yates 7 Rivers Queen	
660	Feet From The West Line
NMPM	Lea County

NON-DRILLING 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.)		B-2656	
1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		7. Lease Name or Unit Agreement Name State A-17	
2. Name of Operator Conoco Inc.		8. Well No. 3	
3. Address of Operator 10 Desta Drive, Suite 100W Midland, TX 79705-4500		9. Pool name or Wildcat Eumont Yates 7 Rivers Queen	
4. Well Location Unit Letter <u>L</u> : <u>1980</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>West</u> Line Section <u>17</u> Township <u>19S</u> Range <u>37E</u> NMPM Lea County			
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3709' DF			

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:	SUBSEQUENT REPORT
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PERFORM REMEDIAL WORK	<input type="checkbox"/>	PLUG AND ABANDON	<input checked="" type="checkbox"/>	REMEDIAL WORK	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
TEMPORARILY ABANDON	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>	COMMENCE DRILLING OPNS.	<input type="checkbox"/>	PLUG AND ABANDONMENT	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>			CASING TEST AND CEMENT JOB	<input type="checkbox"/>		
OTHER: _____	<input type="checkbox"/>			OTHER: _____	<input type="checkbox"/>		

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.

See attached procedure.

THE COMMAND MUST BE MOTIVATED BY
HONORING NOT TO THE BEGINNING OF
THEIR RELATIONS FOR THE
12-1-1964

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

SIGNATURE Craig Wallenbagen TITLE Engineer DATE June 11, 1991

TYPE OR PRINT NAME Craig Wittenhagen TELEPHONE NO. 915-686-6540

(This space for State Use) ORIGINAL SIGNATURE OF JERRY STANON
DEPUTY SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

JUN 19 1991