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 P.O. Box 198C, Hobbs, NM 88240 OIL CONSERVATION DIVISION

2040 Pacheco St. Santa Fe, NM 87505

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Indicate Type of Lease	

DISTRICT II 7. Drawer DD, Artesia, NM 88210

1000 Rio Brazos Rd., Aztec, NM 87410

FFF STATE X 6. State Oil & Gas Lease No.

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Cooper B 1. Type of Well: OIL WELL 8. Well No. 2. Name of Operator 10 Concho Resources Inc. 9. Pool name or Wildcat 3. Address of Operator 110 W Louisiana, Ste 410, Midland, Texas 79701 Monument Blinebry 960 North West Unit Letter _ D ____; ____330 Feet From The _____ Line and Feet From The 20S 37E Lea NMPM Range Section Township 10. Elevation (Show whether DF, RKB, RT, GR, etc.) Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. SUBSEQUENT REPORT OF: NOTICE OF INTENTION TO:

ALTERING CASING PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK PLUG AND ABANDONMENT TEMPORARILY ABANDON **CHANGE PLANS** COMMENCE DRILLING OFINS. CASING TEST AND CEMENT JOB . OR ALTER CASING OTHER: MIT- Temporarily Abandon

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.

The following procedure was performed on the Cooper B #10 well to temporarily abandon the well. (Gary Wink - NMOCD has verbally approved this subsequent approval): March 25, 1998 -

- Notified NMOCD of test. Test was not witnessed by NMOCD.
- MIRU Dawson Well Serv. PU tbg string. RIH w/ 7" casing scraper to 5668'.
- TOH. TIH w/Hudson pkr & set @ 5562'.
- RU McClaskey Tucking to run MIT.
- Pressure up to 500# on test gauge (chart shows 480#) for 30 mins. Held okay. 5.
- Release pkr.
- Kill well w/brine wtr. TOH and LD tbg & pkr.

Mandonners De I hereby certify that the information above to true and complete to the best of my knowledge and belief. Production Ana yst 4/22/98 SKINATURE

TELEPHONE NO. 915-683-7443 Terri Stathem TYPE OR PRINT NAME

Thus space for State Use) ORIGINAL SIGNED BY OHRIS WILLIAMS DISTRICT I SUPERVISOR .

CONDITIONS OF APPROVAL, IF ANY: