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## State of New Mexico Energy, Minerals and Natural Resources Department

Form C 103 Revised 1-1-89

District Office			•		ROVISC		
DISTRICT I P.O. Box 1980, Hobbs, NM S8240	OIL CONSERV.		DIVISION	WELL API NO.			
1.O. DOX 1700, 110003, 1101 00210	P.O. Box 2088 Santa Fe, New Mexico 87504-2088			30-025-26148			
P.O. Drawer DD, Artesia, NM 88210	Santa re, New N	4 CX 1CO 8 / 3 (	74-2000	5. Indicate Type of	Lease STATE	FEE	
DISTRICT T11 T000 Rio Brazos Rd., Aztec, NM 87410				6. State Oil & Gas			
				В 10233			
( DO NOT USE THIS FORM FOR PRO DIFFERENT RESEI (FORM C	ICES AND REPORTS ( DPOSALS TO DRILL OR TO RVOIR. USE •APPLICATION -101) FOR SUCH PROPOSA	DEEPEN OR I	PLUG BACK TO A	7. Lease Name or U	Init Agreement Na		
1. Type of Well:  Oil Well  Well  Gas Well	OTHER				State KN	•	
2. Name of Operator				8. Well No.			
Conoco Inc.			· · · · · · · · · · · · · · · · · · ·		5		
3. Address of Operator 10 Desta Dr. Ste 100W, Midland, Tx,, 79705-4500					9. Pool name or Wildcat Eunice Yates 7 Rvrs Queen		
10 Desta Dr. Ste 10000, Midial	1a, 1x,, /9/05-4500			Eunice	Yates / Rvrs C	ueen	
Unit Letter M 660	Feet From The	South	I ine and	660 Feet From	ть We	st Line	
Unit Letter 141	rectrioin the	<del>7.5</del>	Line and	reet Floili	The	Line	
Section 12	Township 19S	Range	36E	NMPM	Lea	County	
///////////////////////////////////////	/////// 10. Elevauon (Sho	ow whether DF,	RKB. RT, GR, ctc.)		<b>/////////////////////////////////////</b>	///////////////////////////////////////	
11. Check	Appropriate Box to In	dicate Nat	ure of Notice,	Report, or Other	Data		
NOTICE OF IN	TENTION TO:		SU	JBSEQUENT R	EPORT OF	•	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	, 🗆 🕍	EMEDIAL WORK		ALTERING CAS	ING	
abla						<u></u>	
TEMPORARILY ABANDON	CHANGE PLANS		DMMENCE DRILL	ING OPNS.	PLUG AND ABA	NDONMENT L	
PULL OR ALTER CASING		C	ASING TEST AND	CEMENT JOB			
OTHER:		_	THER				
<ol> <li>Describe Proposed or Completed Cowork/SEE RULE 1103.</li> <li>It is proposed to temporarily abonded.</li> <li>Clean out to 3735' with bit and 2. Set CIBP @ 3735'.</li> <li>Cicrulate packer fluid.</li> <li>Pressure test casing to 500 psi</li> </ol>	on this well by the follow	ing procedure	<b>:</b> :	including estimated date o	of starting any prop	osed	
12. I hereby centify that the information above is to signature  Type or print name Bill R. Keathly  (this space for State Use)	orie and complete to the best of my kn	nowledge and belie		latory Specialist		8-19-97 - 915 686-542-	
APPROVED BY	Paul Kautz	TITLE <b>-</b>			₩ <b>₩</b> ₩₩	. ₩ ₩ 133f	

CONITIONS OF APPROVAL, IF ANY: