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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	B-10233

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Conoco Inc.	8. Farm or Lease Name State KN-12
3. Address of Operator P.O. Box 460, Hobbs, N.M. 88240	9. Well No. 7
4. Location of Well UNIT LETTER <u>0</u> , <u>330</u> FEET FROM THE <u>S</u> LINE AND <u>1650</u> FEET FROM THE <u>E</u> LINE, SECTION <u>12</u> TOWNSHIP <u>19S</u> RANGE <u>36E</u> NMPM.	10. Field and Pool, or Wildcat Eumont Yates 7 Rvrs. Qn.
15. Elevation (Show whether DF, RT, GR, etc.) 3925.5' GR	12. County Lea

16.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input 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"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

MIRU & Spud well 1-19-80. Reached surface csq. TD of 1400' on
1-20-80. Ran 35 jts. 8 5/8", 24", K-55, ST&C csq. set @ 1400'.
Cmt. w/ 674 sx. class "C" cmt. w/ additives. Circ. 80 sx. to surface

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

SIGNED Wm. D. Butterfield TITLE Administrative Supervisor DATE 11/22/80

Orig. Signed
Jerry Sexton

APPROVED BY Dan L. Smith TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: