

DISTRICT I
P.O. Box 2088, Hobbs, NM 88240

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

DISTRICT III
1000 Elia Avenue S.E., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30-025-31297

1. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
B-2657

7. Lease Name or Unit Agreement Name

State A-2 "A"

8. Well No.
7

9. Pool name or Widened
Skaggs Drinkard

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 G-101) FOR SUCH PROPOSALS.)

1. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator
CONOCO INC.

3. Address of Operator
10 DESTA DRIVE, STE 100 W, MIDLAND, TX 79705

4. Well Location
Unit Letter I : 1650 Feet From The South Line and 330 Feet From The East Line

Section 2 Township 20S Range 37E NMPM Lea County

10. Illustration (Show whether LF, RCH, 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: Production casing ☒

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.

Drilled 8 3/4" hole to TD 7050'. Ran in hole w/ 165 jts of 7" 26# K-55 LT+C csg. First stage: Lead w/ 300 sks of Class "C" 35-65-4 + .5% fluid loss control + .1% free water control + 1% CaCl2 cmt. 2ail w/ 225 sks of Class "H" + .7% fluid loss control + .3% free water control + .1% CD-31 dispersant cmt. Circ 100 sks of cmt. Second stage: Lead w/ 1500 sks of Class "C" 35-65-4 + .6% fluid loss control + 2% CaCl2 + 10% A-5 cmt. 2ail w/ 100 sks of Class "C" .9% fluid loss control + 1% CaCl2 cmt. Circ 130 sks of cmt to pit. Release rig on 8-13-91.

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

SIGNATURE Christine L. Neff TITLE ADMIN. ASSISTANT DATE 8-20-91

TYPE OR PRINT NAME Christine L. Neff TELEPHONE NO. 686-6594

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

COMMISSIONER OF GEORVING, IF ANY: