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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-1536

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> <small>(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.)</small>	
1. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name
2. Name of Operator Conoco Inc.	8. Farm or Lease Name STATE E
3. Address of Operator P. O. Box 460, Hobbs, New Mexico 88240	9. Well No. 1
4. Location of Well UNIT LETTER <u>I</u> <u>660'</u> FEET FROM THE <u>SOUTH</u> LINE AND <u>660'</u> FEET FROM THE <u>EAST</u> LINE, SECTION <u>17</u> TOWNSHIP <u>22S</u> RANGE <u>36E</u> NMPM.	10. Field and Pool, or Wildcat SOUTH EUNICE SEVEN RIVERS QUEEN
15. Elevation (Show whether DF, RT, GR, etc.) 3556' DF	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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER <u>ISOLATE PENROSE &amp; TEST QUEEN</u> <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input 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. CLEAN OUT FILL TO 3750' WITH HYDROSTATIC BAILER, IF NECESSARY. SET INFLATABLE OPEN HOLE BRIDGE PLUG @ 3730'. IF PLUG CANNOT BE SET, DUMP 5 SK. CEMENT FROM 3720' TO 3730'. RUN PRODUCTION EQUIPMENT. TEST.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNED <u>Jerry Sexton</u>	TITLE <u>Administrative Supervisor</u>	DATE <u>6/7/83</u>
ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR		
APPROVED BY _____	TITLE _____	DATE <u>JUN 15 1983</u>

RECEIVED

JUN 8 1983

O.C.D.  
HOBBS OFFICE