

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 I
P.O. Box 1980, Hobbs, NM 88240

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

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

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

WELL API NO. 30-025-08938

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No. B-1536

7. Lease Name or Unit Agreement Name

State &

8. Well No. 4

9. Pool name or Widened
Jalmut, Gates, SR, Gas

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. Type of Well: OIL WELL ☐ GAS WELL ☒ OTHER ☐	
2. Name of Operator Conoco Inc.	
3. Address of Operator 10 Desta Dr. Midland, TX 79705	
4. Well Location Unit Letter E : 1980 Feet From The North Line and 660 Feet From The West Line Section 17 Township 22S Range 36E NMPM Lea County	
10. Elevation (Show whether DF, RKB, 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: Temporary 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.

1-11-91 2st cog to 500# for 15 min - HELD.

7" CIBP at 3150.

Request approval for temporary abandonment.

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

SIGNATURE Christine L. Neff TITLE Gas Assistant DATE 4-17-91

TYPE OR PRINT NAME Christine L. Neff TELEPHONE NO. 686-5494

(This space for State Use) ORIGINAL SIGNED BY [Signature] DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

This Approval of Temporary Abandonment Expires 4-17-96

MAY 28 1991