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.	08970
	30-025-~~0997~~

5. Indicate Type of Lease — STATE ☐ FEE ☒

6. State Oil & Gas Lease No.
8910115867

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
P.O. Box 460 - Hobbs, NM 88240

4. Well Location

Unit Letter J : 1980 Feet From The South Line and 1052 Feet From The East Line

Section 21   Township 22S   Range 36E   NMPM   Lea County

7. Lease Name or Unit Agreement Name
South Eunice Unit

8. Well No. #19

9. Pool name or Wildcat
Eunice 7 Rivers Queen SO.

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: Shooting and Stimulating ☒

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.

8-15-89 MIRU. TFF @ 3808'. Perf 4 jspf 3628-3763'. Stimulate w/90 bbls
15% HCL. Swabbed back load. Return to production.

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

SIGNATURE _W.W. Baker_ TITLE Administrative Supervisor DATE Sept. 6, 1989

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)
ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

SEP 12 1989

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: