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 S8240

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

P.O. Drawer DD, Artesia, NM 88210

DISTRICT T11
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.
30-025-08971

5. Indicate Type of Lease

STATE ☐   FEE ☒

6. State Oil & Gas Lease No.

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.)

7. Lease Name or Unit Agreement Name

1. Type of Well:

Oil Well ☐   Gas Well ☐   OTHER Injection Well

South Eunice Unit

2. Name of Operator

Conoco Inc.

8. Well No.

30

3. Address of Operator

10 Desta Dr. Ste 100W, Midland, Tx 79705-4500

9. Pool name or Wildcat

Eunice 7 Rivers Queen, So.

4. Well Location

Unit Letter O   660 Feet From The South Line and 1650 Feet From The East Line

Section	21	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   Request TA Status   ☒

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.

Conoco requests permission to Temporary Abandon the above referenced well.

CIT was run 10/21/99; see chart attached, witnessed by B. Hill.

11-8-2004

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

SIGNATURE _Reesa Wilkes_

TITLE Sr. Staff Regulatory Assistant

DATE 10/29/99

TYPE OR PRINT NAME Reesa R. Wilkes

TELEPHONE NO. 915/686-5580

(this space for State Use)

ORIGINAL SIGNED BY
GARY MINK
FIELD REP.

NOV – 8 1999

APPROVED BY_____ TITLE _____ DATE _____

CONITIONS OF APPROVAL, IF ANY:

Dist: OCD (3), SHEAR, PONCA, CasT AssT, Well File, Field