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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 ☐ Fee ☒
5. 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.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Injection Well</u>	7. Unit Agreement Name <u>South Eunice Unit</u>
2. Name of Operator <u>Conoco Inc.</u>	8. Farm or Lease Name <u>South Eunice Unit</u>
3. Address of Operator <u>P.O. Box 460 - Hobbs, New Mexico 88240</u>	9. Well No. <u>18</u>
4. Location of Well UNIT LETTER <u>K</u> <u>1980</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM THE <u>West</u> LINE, SECTION <u>21</u> TOWNSHIP <u>22S</u> RANGE <u>36E</u> NMPM.	10. Field and Pool, or Wildcat <u>Eunice 7 RVRs Queen</u>
15. Elevation (Show whether DF, RT, GR, etc.)	12. County <u>Lea</u>

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER Clean Out, Annulide Pay & Stimulate ☒

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 1103.

Work started on 9/13/88. MIRR. Tag for fall at 3500'. Clean out to 3311'.
Puff 3670'-80' w/ 4 spf. Acidize 3670'-3811' w/ 90% 15% HCL-NE-PE
acid. Seab-Back 105 BW. G/H w/ pre & log. Return well to
injection.

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

SIGNED Jerry Sexton JERRY SEXTON

TITLE Administrative Supervisor

DATE November 14

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR

APPROVED BY

TITLE

DATE NOV 17 1988

CONDITIONS OF APPROVAL, IF ANY: