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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 <input checked="" type="checkbox"/> <i>Injection Well - Water</i>	7. Unit Agreement Name <i>South Eunice Unit</i>
2. Name of Operator <i>Conoco Inc.</i>	8. Farm or Lease Name <i>South Eunice Unit</i>
3. Address of Operator <i>P.O. Box 460, Hobbs, N.M. 88240</i>	9. Well No. <i>18</i>
4. Location of Well UNIT LETTER <i>K</i> <i>1980</i> FEET FROM THE <i>South</i> LINE AND <i>1980</i> FEET FROM THE <i>West</i> LINE, SECTION <i>21</i> TOWNSHIP <i>22S</i> RANGE <i>36E</i> NMPM.	10. Field and Pool, or Wildcat <i>Eunice 7-Pore Queen Co.</i>
15. Elevation (Show whether DF, RT, GR, etc.) <i>3534' GR.</i>	12. County <i>Lea</i>

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 *Notice of Shut in State  
Injection Well* ☒

ALTERING CASING ☐  
PLUG AND ABANDONMENT ☐

11. 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.

*This is to inform you that the referenced well was shut in 7-30-87 due to a hole in the tubing.*

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

SIGNED *Jerry Sexton*

TITLE *Administrative Supervisor* DATE *July 31, 1987*

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

AUG 3 1987

CONDITIONS OF APPROVAL, IF ANY: