+Submit 3 Copies to Appropriate

State of New Mexico Forsn C loo Energy, Minerals and Natural Resources Department Revised 1-1-89 District Office OIL CONSERVATION DIVISION DISTRICT I P.O. Box 1980, Hobbs, NM S8240 WELL API NO. P.O. Box 2088 30-025-09004 Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease FEE X DISTRICT T11 1000 Rio Brazos Rd., Aztec, NM 87410 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 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE •APPLICATION FOR PERMIT (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: Injection Well Well OTHER So. Eunice Unit 2. Name of Operator 8. Well No. Conoco Inc. 3. Address of Operator 9. Pool name or Wildcat Eunice 10 Desta Dr. Ste 100W, Midland, Tx., 79705-4500 Eumont Yates 7 Rvrs Qn, So. 4. Well Location North 1980 Unit Letter\_ Feet From The Line and Feet From The Line Section Township **NMPM** Range County 10. Elevauon (Show whether DF, RKB, RT, GR, ctc.) Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON **CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT PULL OR ALTER CASING CASING TEST AND CEMENT JOB Temporary Abandon OTHER: OTHER 12. Describe Proposed or Completed Operations (Clearly staate all pertinent details, and give pertinent dates, including estimated date of starting any proposed world) SEE RULE 1103. 10-21-96 MIRU. GIH release packer, POOH. GUH W/ bit & scraper to 3665', POOH. GIH W/ CIBP set @ 3635', W/ 30' of cement on top. 12-22-96 RDMO. 1-29-97 RU. Test casing to 500# for 30 min, cut chart, see copy attached. Conoco requests that this well be considered as Temporary Abandon. This Approved of Taxon Abandonment Expires I I hereby certify that the information above is true and complete to the best of my knowledge and belief. Sr. Regulatory Specialist 2-5-97 TYPE OR PRINT NAME Bill R. Keathly 915-686-542 TELEPHONE NO. (this space for State Use) PORTAL SECTION

CONITIONS OF APPROVAL, IF ANY

DICTRION I COMETY NOR

