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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 <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. B-1536
7. Unit Agreement Name
8. Farm or Lease Name State E
9. Well No. 10
10. Field and Pool, or Wildcat Devonian/Ellenburger
12. County Lea

**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 - 1" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER-
2. Name of Operator CONOCO INC.
3. Address of Operator P. O. Box 460, Hobbs, N.M. 88240
4. Location of Well UNIT LETTER <u>0</u> , <u>660</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE, SECTION <u>17</u> TOWNSHIP <u>22S</u> RANGE <u>36E</u> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.)

16.

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

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <u>acidize</u> <input checked="" type="checkbox"/>

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 1105.

MIRU. Pmpd 30,000 scf N<sub>2</sub>, 100 bbls nitrified 15% HCL & flush w/4500 scf N<sub>2</sub>. Circ. Flwd. Pmpd 100,000 scf N<sub>2</sub> down tbg. Acidize Ellenburger w/245 bbls 15% HCL-NE-FE acid w/methanol w/1500 scf/bbl N<sub>2</sub>. Flush w/126,000 scf N<sub>2</sub>. Devonian flwd 41 BO, 180 BW & 738 MCF on 11/17/84. Ellenburger flwd 0 BO, 0 BW & 38 MCF on 3/22/85.

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

SIGNED David S. Smylie TITLE Administrative Supervisor DATE 4/25/85

APPROVED BY DISTRICT 1 SUPERVISOR TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: