Submit 3 Copies to Appropriate District Office

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

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

State of New Mexico
Energy, Minerals and Natural Resources Department

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

Form C-103
Revised 1-1-89

WELL API NO. 30-025-30707

5. Indicate Type of Lease STATE [X] FEE [ ]

6. State Oil & Gas Lease No. B-9652

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: WARREN MCKEE BRINE

1. Type of Well: OIL WELL [ ] GAS WELL [ ] OTHER BRINE EXTRACTION

2. Name of Operator: CONOCO INC. <005073>

8. Well No. 2

3. Address of Operator: 10 Desta Drive Ste 100 W. Midland, TX 79705

9. Pool name or Wildcat: BSW: SALADO

4. Well Location
Unit Letter N : 660 Feet From The SOUTH Line and 1980 Feet From The WEST Line

Section 2 Township 20 S Range 38 E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR 3590

11. 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	[X]
PULL OR ALTER CASING	[ ]			CASING TEST AND CEMENT JOB	[ ]		
OTHER:	[ ]			OTHER:	[ ]		

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.

3-14-95 MIRU. GIH W/ 7" CIBP SSET @ 1550'. CIRCULATE MUD. SPOT 35 SX CEMENT FROM 1550' TO 1340'. PUH TO 470' SPOT 25 SX CEMENT. PUH. TAG PLUG @ 320'. SPOT 15 SX CEMENT FROM 60' TO SURFACE. CUT OFF WELLHEAD AND INSTALL P&A MARKER.

3-15-95 RDMO. WELL IS PLUGGED.

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

SIGNATURE Bill R. Keathly TITLE SR. REGULATORY SPEC. DATE 4-12-95

TYPE OR PRINT NAME BILL R. KEATHLY TELEPHONE NO. 915-686-5424

(This space for State Use)

APPROVED BY E. Gonzales TITLE Fld. Rep. DATE 5-11-00

CONDITIONS OF APPROVAL, IF ANY:

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