+Submit 3 Copies to Appropriate

State of New Mexico Energy, Minerals and Natural Resources Department

Form C 103 Revised 1-1-89

| District Office | | | | 11011300 1 | 1 0) |
|--|--|---|---|---|----------|
| DISTRICT I P.O. Box 1980, Hobbs, NM S8240 | OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088 | | WELL API NO. 30 025 32479 5. Indicate Type of Lease STATE FEE | | |
| DISTRICT II P.O. Drawer DD, Artesia, NM 88210 | | | | | |
| DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 | | | 6. State Oil& Gas Lease No. B 2656 | | |
| 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 | | |
| 1. Type of Well: Oil Gas Well Well Well | OTHER | | | Hardy 36 State | |
| 2 Name of Operator Conoco Inc. | | | 8. Well No. | 3 | |
| 3 Address of Operator 10 Desta Dr. Ste 100W, Midland, Tx., 79705-4500 | | | 9. Pool name or Wildcat Wildcat Blinebry | | |
| 4. Well Location Unit Letter G 2080' | Feet From The North | Line and17: | 30' Feet Fr | om The East | Line |
| Section 36 | | 0 0,2 | NMPM | Lea | County |
| 10. Elevation (Show whether DF, RKB. RT, GR, etc.) | | | ////// | /////////////////////////////////////// | //////// |
| Check A NOTICE OF INTE | ppropriate Box to Indicate ENTION TO: | | | er Data REPORT OF: | |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON | REMEDIAL WORK | | ALTERING CASING | |
| TEMPORARILY ABANDON | CHANGE PLANS | COMMENCE DRILLING | OPNS. | PLUG AND ABANDO | NMENT |
| PULL OR ALTER CASING | | CASING TEST AND CE | MENT JOB | | |
| OTHER: | | OTHER recompletion | | | X |
| 12. Describe Proposed or Completed Opwork/SEE RULE 1103. 7-19-01: RIH & set CiBP @ 6375'. Le 5650-62', 5746-54', 5780-90'. Dump bw/53,000 gals Spectra & 173,000# 16 Well converted from WIW to Blinebry | paded hole w/97 bbls brine, teste vailed 35' cement on CIBP. Acid /30 sand. Well put on production | ed casing to 4500 psi. Plized Blinebry w/3000 g | erforated Bline gals 15% NEFE | bry w/2spf @ 5634-4 HCL. Fraced Blineb | v |
| | | | | | |

to the best of my knowledge and belief. TITLE Regulatory Agent SIGNATURE 915 684-6381 TYPE OR PRINT NAME Ann E. Ritchie TELEPHONE NO. 915 686-5580(this space for State Use)

TITLE

APPROVED BY

JAN 1 1 2002

CONITIONS OF APPROVAL, IF ANY