+Submit 3 Copies to Appropriate District Office

## State of New Mexico

DISTRICT I

P.O. Box 1980, Hobbs, NM S8240

DISTRICT II

P.O. Drawer DD, Artesia, NM 88210

DISTRICT III

1. Type of Well: Oil Well

2. Name of Operator

3. Address of Operator

Unit Letter

Section

PERFORM REMEDIAL WORK

work) SEE RULE 1103.

released 5-20-97. WOC.

**TEMPORARILY ABANDON** 

**PULL OR ALTER CASING** 

OTHER:

4. Well Location

1000 Rio Brazos Rd., Aztec, NM 87410

Conoco Inc.

36

990

Form C 103 Energy, Minerals and Natural Resources Department Revised I-1-89 OIL CONSERVATION DIVISION WELL API NO. P.O. Box 2088 30 025 33924 Santa Fe, New Mexico 87504-2088 5. Indicate Type of Lease STATE FEE 6. State Oil& Gas Lease No. SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name ( 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.) OTHER Hardy 36 State 8. Well No. 9. Pool name or Wildcat 10 Desta Dr. Ste 100W, Midland, Tx., 79705-4500 Hardy Simpson-Ellenburger South Feet From The 1980 Line and West Feet From The Line Township **20S** Range 37E **NMPM** County Lea 10. Elevation (Show whether DF, RKB. RT, GR, etc.) 3489' Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PLUG AND ABANDON REMEDIAL WORK **ALTERING CASING CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT CASING TEST AND CEMENT JOB OTHERCement Prod Csg & release rig 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed 5-20-97: Ran 10,340' of 51/2", 17#, K-55, L-80 casing, cemented with lead slurry of  $290 \times 65/35/6 + 5\%$  salt + 1/2% FL-52 + 3/10 SM + 1/4pps Cello flake, tailed with 325 sx Cl H + 1.1% FL-32 + 1% AB-90 + 3% dcl + 1/2% CD-32 + 2/10% SM. Stage 2: lead slurry of 465 sx Cl C + 16% gel + 3% Salt + 3/10CD-36 + 3/10 SM tailed with 1040 sx Cl C + 1.1% FL-62 + 2% BA-90 + 3% salt + 2/10 CD-32 + 3/10 SM. Rig

I hereby certify that the information above	is to and complete to the best of m	y knowledge and belief.	
SIGNATURE	( Lukhi	Regulatory Agent	DATE 6-5-97
TYPE OR PRINT NAME Ann E. Ritchie			TELEPHONE NO. 915 684-6381
(this space for State Use)	ORIGINAL SIGNED BY CHRIS WILLIAMS DISTRICT 1 SUPERVISOR		usis <b>3.4</b>
APPROVED BY		TITLE ————————————————————————————————————	JUN 11 1997

