+Submit 3 Copies to Appropriate

State of New Mexico Energy, Minerals and Natural Resources Department

Form C 103 Revised 1-1-89

District Office OIL CONSERVATION DIVISION DISTRICT I WELL API NO. P.O. Box 1980, Hobbs, NM S8240 P.O. Box 2088 30 025 34794 Santa Fe, New Mexico 87504-2088 DISTRICT II 5. Indicate Type of Lease P.O. Drawer DD, Artesia, NM 88210 STATE FEE DISTRICT III 6. State Oila Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 B 2656 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.) 1. Type of Well: Oil Well Gas Injection-Hardy 36 State 2. Name of Operator 8. Well No. Conoco Inc. 9. Pool name or Wildcat 3. Address of Operator 10 Desta Dr. Ste 100W, Midland, Tx., 79705-4500 North Hardy Strawn 4. Well Location South 2200 1650 Feet From The East Feet From The Line and Line Township NMPM Section 36 **20S** Range 37E Lea County 10. Elevation (Show whether DF, RKB. RT, GR, etc.) 3493 GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: **PLUG AND ABANDON** PERFORM REMEDIAL WORK REMEDIAL WORK **ALTERING CASING CHANGE PLANS TEMPORARILY ABANDON** COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT **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. 3-18-00: Reached total depth of 7907'. 3-19/20-00; Logging. 3-21-00: Ran 7907' of 7", 23#, 595/P110, LTC casing, cemented with 1st stage: lead slurry - 325 sx Cl C + 35:65 POZ + 6% gel + 1/4# celloflake, tailed with 590 sx Cl C + 1% BA-58 + 7% FL-62 + 4% CD-32 + .2% SMS + 2# KCL. State collar depth: 3951', 2nd stage: lead slurry - 1121 sx Cl C + 35:65 POZ + 6% gel + 1/4# celloflake, tailed with 68 sx Cl C 35:65 POZ + 6% gel + 1/4# celloflake. Tested to 2850 psi. WOC. I hereby certify that the information Regulatory Agent 4-5-00 SIGNATURE -TYPE OR PRINT NAME Ann E. Ritchie TELEPHONE NO. 915 684-6381 (this space for State Use)

APPROVED BY

CONITIONS OF APPROVAL, IF ANY:

Receiver