+Submit 3 Copies	State of New M	lexico	Form C 103		
to Appropriate District Office	Energy, Minerals and Natural Resources Department		Revised 1-1-89		
<u>DISTRICT</u> I P.O. Box 1980, Hobbs, NM S8240	OIL CONSERVATIO		WELL API NO.		
DISTRICT II	30 025 06699				
P.O. Drawer DD, Artesia, NM 88210 DISTRICT III	Santa Fe, New Mexico		5. Indicate Type of Lease STATE FEE	X	
1000 Rio Brazos Rd., Aztec, NM 87410		6. State Oil& Gas Lease No. FEE			
SUNDRY NOT ( DO NOT USE THIS FORM FOR PRI DIFFERENT RESE (FORM C	7. Lease Name or Unit Agreement Name				
1. Type of Well: Oil Sa Gas	1. Type of Well:				
Well Well	OTHER		M.E. Wantz		
2. Name of Operator Conoco Inc.	2. Name of Operator Conoco Inc.				
3. Address of Operator			9. Pool name or Wildcat		
10 Desta Dr. Ste 100W, Midlar 4. Well Location	nd, Tx., 79705-4500		Paddock		
Unit Letter N 660	Feet From The South	Line and23	10 Feet From The West		
			rearion the	Line	
Section 21			NMPM Lea Count	y	
	-	· · · · · · · · · · · · · · · · · · ·	///////////////////////////////////		
	Appropriate Box to Indicate		-		
NOTICE OF INT	ENTION TO:	SUB	SEQUENT REPORT OF:	,	
	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING		
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. PLUG AND ABANDONMENT		
PULL OR ALTER CASING	LL OR ALTER CASING				
OTHER:		OTHER Frac job		X	
12. Describe Proposed or Completed Op	erations (Clearly state all pertinent details	and give pertinent dates, incl	uding estimated date of starting any proposed		
work)SEE RULE 1103. 3-14-97: Rig up. frac Paddock: pump	197 bbls Spectra Frac G w/66604	100 mesh sand 48 bbl	SFG 3500 pad, 74 bbl SFG 3500, ramping		
with 17,030# RA.		100 mesn saini, 40 001	Si d 5500 pad, 74 ooi Si d 5500, lanping		
3-17-97: Packer would not release, cu	it and pushed packer to 4953'.				
3-19-97: Pushed packer to 5261', dry	drilled.				
3-20-97: Retrieved packer, clean out 3-21-97: Finish POH w/RBP, run pos	to RBP, POH, laten on and releases at treatment log	se RBP, start to POH.			
		SN @ 5334'. Go in ho	le with rods & pump, put well on production	n.	
		<u> </u>			
	$\frown$				
/	)				
11	$\Lambda$				
I hereby certify that the information above is nue	and complete to the best of my knowledge and l	belief.			
SIGNATURE	hu TIT	Regulatory Agent	DATE 5-21-97		
TYPE OR PRINT NAME ANN E. Ritchie			TELEPHONE NO. 915 684-63	81	
(this space for State Use) Orig. Sign					
Paul K Goobte	nutz				

- TITLE -

- DATEMAY 88 1997-

A.	P P J	101	ED	₿Y	- <u></u>	_

CONITIONS OF APPROVAL, IF ANY: