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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	

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.
(SEE APPLICATION FOR PERMIT - M (FORM C-101) FOR SUCH PROPOSALS.)

6. Indicate Type of Well OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		7. Unit Agreement Name
8. Name of Operator CONOCO INC.		8. Farm or Lease Name <i>M.E. Wantz</i>
9. Address of Operator P.O. Box 460, Hobbs, N.M. 88240		9. Well No. 9
10. Location of Well UNIT LETTER J 1980 FEET FROM THE South LINE AND 1980 FEET FROM THE East LINE, SECTION 21 TOWNSHIP 21S RANGE 37E N.M.P.M.		10. Field and Pool, or Wildcat Tubb Gas
11. Elevation (Show whether DF, RT, GR, etc.)		12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK	<input type="checkbox"/>
TEMPORARILY ABANDON	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>
OTHER	<input type="checkbox"/>

PLUG AND ABANDON	<input type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>
OTHER	<input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
COMMENCE DRILLING OPNS.	<input type="checkbox"/>	PLUG AND ABANDONMENT	<input type="checkbox"/>
CASING TEST AND CEMENT JOB	<input type="checkbox"/>	OTHER	<input checked="" type="checkbox"/> Returned to Production

17. Describe in brief or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

6/24/82. Swabbed well. Did not come around. Shut well in. Opened well up
7/2/82. Pumped water down backside of casing. Dissolved salt bridge.
Returned well to production. Tested 7/7/82: 25 MCFPD.

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

SIGNED <i>Wm A. Butterfield</i>	TITLE Administrative Supervisor	DATE 7/13/82
ORIGINAL SIGNED BY JERRY SEXTON DISTRICT 1 SUPR.		
APPROVED BY	TITLE	DATE
JUL 16 1982		

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JUL 15 1982

**Q.C.D.
HOBBS OFFICE**