

+Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C 103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

P.O. Drawer DD, Artesia, NM 88210

DISTRICT T11
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.

30-025-26005

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

B-1535

7. Lease Name or Unit Agreement Name

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.)

1. Type of Well:

Oil
Well ☐

Gas
Well ☒

OTHER

State F-1

2. Name of Operator

Conoco Inc.

8. Well No.

8

3. Address of Operator

10 Desta Dr. Ste 100W, Midland, Tx 79705-4500

9. Pool name or Wildcat

Eumont Yates 7 Rivers Queen (Pro Gas)

4. Well Location

Unit Letter SR 1980 Feet From The South Line and 1980 Feet From The East Line

Section 1 Township 21S Range 36E NMPM Lea County

10. Elevaoun (Show whether DF, RKB, RT, GR, etc.)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER ☒ Request/Renew TA Status

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.

Conoco requests renewal approval of Temporary Abandonment status for the above referenced well. A new, valid MIT was run on 3/4/02, see chart attached.

We would like to retain this wellbore for evaluation of Eumont/Yates/Seven Rivers potential. This evaluation should be completed within the next 18-24 months.

This Approval of Temporary
Abandonment Expires 3/18/07

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

SIGNATURE Reesa R. Wilkes

TITLE

Regulatory Specialist

DATE

3/13/02

TYPE OR PRINT NAME Reesa R. Wilkes

TELEPHONE NO. 915/686-5580

(this space for State Use)

ORIGINAL SIGNED BY

APPROVED BY

GARY W. WINK TITLE

CONDITIONS OF APPROVAL, IF ANY:

OCD FIELD REPRESENTATIVE II/STAFF MANAGER

MAR 19 2002

Distribution: OCD (3), SHEAR, PONCA, COST ASST, FIELD, WELL FILE

