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to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C 100
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 II
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.	30-025-26005
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	B 1535
7. Lease Name or Unit Agreement Name	State F 1
8. Well No.	8
9. Pool name or Wildcat	Eumont Yates 7 Rvrs Qn (pro gas)
10. Elevauon (Show whether DF, RKB, RT, GR, etc.)	

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 <input type="checkbox"/> Gas <input checked="" type="checkbox"/> OTHER
2. Name of Operator	Conoco Inc.
3. Address of Operator	10 Desta Dr. Ste 100W, Midland, Tx., 79705-4500
4. Well Location	Unit Letter J 1980 Feet From The South Line and 1980 Feet From The East Line Section 1 Township 21S Range 36E NMPM Lea County
10. Elevauon (Show whether DF, RKB, RT, GR, etc.)	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: Renew TA Status <input checked="" type="checkbox"/>

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 wishes to renew the TA status for the above listed well, see attached CIT chart

This Approval of Temporary
Abandonment Expires 2-1-2002

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

SIGNATURE Bill R. Keathly TITLE Sr. Regulatory Specialist DATE 2-5-97
TYPE OR PRINT NAME Bill R. Keathly TELEPHONE NO. 915-686-5424

(this space for State Use)

APPROVED BY Bill R. Keathly TITLE Sr. Regulatory Specialist DATE 2-1-1997

CONITIONS OF APPROVAL, IF ANY: