| NO. OF COPIES RECEIVED                             | _  |                                       | Form C-103   |
|--|--|---------------------------------------|--|
| DISTRIBUTION                                       |  |                                       | Supersedes Old   |
| SANTA FE   | NEW MEXICO OIL CONSERV   | ATION COMMISSION                      | C-102 and C-103<br>Effective 1-1-65                                |
| FILE   |  |                                       |  |
| U.S.G.S.   | 1  |                                       | 5a. Indicate Type of Lease   |
| LAND OFFICE  | ]  |                                       | State Fee.   |
| OPERATOR   | 1  |                                       | 5. State Oil & Gas Lease No.                                       |
| \  |  |                                       | B-1535   |
| SUND   | RY NOTICES AND REPORTS ON WEL  | 1 C                                   | mmmmmm   |
| (DO NOT USE THIS FORM FOR PR<br>USE "APPLICA"      | OPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TION FOR PERMIT -" (FORM C-101) FOR SUCH PRO  | O A DIFFERENT RESERVOIR,              |  |
| 1.   | The state of the s | 703423.)                              | 7. Unit Agreement Name   |
| OIL GAS WELL                                       | OTHER.   |                                       |  |
| 2. Name of Operator                                |  |                                       | 8. Farm or Lease Name  |
| Conoco Inc.  |  |                                       | State F-1  |
| 3, Address of Operator                             |  |                                       | 9. Well No.  |
| P.O. Box 460 - Hobb                                | s, New Mexico 88240  |                                       | 0  |
| 4. Location of Well                                | 3, New Hexico 00240  |                                       | 7  |
|  | 330 PEET FROM THE SOUTH .  | INE AND 330 PEET PA                   | 10. Field and Pool, or Wildow<br>Maidy Efinetry<br>Mairty Drinkard |
|  |  |                                       |  |
| THE LINE, SECTI                                    | ion  | RANGE 36 F NM                         |  |
|  |  |                                       |  |
|  | 15. Elevation (Show whether DF, 1  | RT, GR. etc.)                         | 12, County   |
|  |  |                                       | XEa MIMM   |
| Check  | Appropriate Box To Indicate Natu   | e of Notice. Report or (              | Other Data   |
|  | NTENTION TO:   |                                       | NT REPORT OF:  |
|  |  |                                       |  |
| PERFORM REMEDIAL WORK                              | PLUG AND ABANDON REM   | MEDIAL WORK                           | ALTERING CASING  |
| TEMPORARILY ABANDON                                | co+  | IMENCE DRILLING OPNS.                 | PLUG AND ABANDONMENT   |
| PULL OR ALTER CASING                               |  | ING TEST AND CEMENT JOB               |  |
|  | <u></u>  | OTHER Wornhole Con                    | ningle Blint Ockd  |
| OTHER  | L-   |                                       | R-8729   |
| 17. Describe Proposed or Completed O               | perations (Clearly state all pertinent details,  | and give pertinent dates includ       | ing actimated data of stanting and account                         |
| work) SEE RULE 1 103.                              | , ,,   | give periment dates, includ           | ing estimated date of starting any propos                          |
| Work started on 1                                  | 0/3/88 MIRU. POOK  | WIRBP, Leid                           | tion Oct had   |
| W/1600 calle 15 %                                  | 1101 0( ) . 1 /  |                                       | ~zo ruinkuu  |
| 1.000 years 10.70                                  | HCL. Swib load. Co   | clough Blinela                        | y.w/1500 gals  |
| 15 to HCL, Kun w                                   | ecclucing equipment  | and olan or                           | a contration   |
| /-   | esacing wyingene .   | sur a prince or                       | · produceron   |
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| 18. I hereby certify that the information          | above is true and complete to the best of my   | knowledge and belief.                 |  |
| (1 <del>/                                   </del> |  |                                       |  |
| SIGNED MANTHAN DI                                  | FYNNEY TITLE Admini  | strative Supervisor                   | DATE Thrember 14 73  |
| - // - 7   |  |                                       |  |

CONDITIONS OF APPROVAL, IF ANY:

ORIGINAL SIGNED BY JERRY SEXTON

ANGERT I

NOV 16 1968

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