

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

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

OIL CONSERVATION DIVISION
310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

WELL API NO.
30-025-32718

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
B-1537

7. Lease Name or Unit Agreement Name

State D

8. Well No.
18

9. Pool name or Wildcat
Elmont Yates 7 Rvrs On (P.G.)

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

2. Name of Operator
Conoco, Inc.

3. Address of Operator
10 Desta Drive, Suite 100W, Midland, Texas 79705

4. Well Location
Unit Letter G : 1780 Feet From The North Line and 1895 Feet From The East Line

Section 15 Township 21S Range 36E NMPM Lea County

10. Elevation (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: ☐

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.

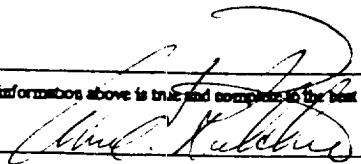
10/12/95 MIRU. NDWH, NUBOP and stripper head. POH w/ 2-7/8" tubing. LD on racks.

10/13/95 P.U. sand pump and tag fill at 3594'. Clean out to 3625'.SDON.

10/19/95 RIH w/ sand pump and clean out to 3654'. POH w/ sand pump. LD pump. RIH w/ 2-3/8" tubing pump out plug and S.N.. Landed notched collar at 3606'. NDBOP, NUWH. RIH w/sinker bar and jars, knocked out plug. Began swabbing.

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

SIGNATURE



Regulatory
Agent

TITLE

DATE 12/27/95

TYPE OR PRINT NAME

Ann E. Ritchie

TELEPHONE NO

(915) 684-6381

(This space for State ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

JAN 08 1996

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY.

