

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

WELL API NO.  
30-025-09076

5. Indicate Type of Lease  
(Fed.) STATE ☐ FEE ☐

6. State Oil & Gas Lease No.  
LC-030133B

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 Injection

2. Name of Operator  
Conoco Inc.

3. Address of Operator  
P.O. Box 460 - Hobbs, NM 88240

4. Well Location  
Unit Letter A : 660 Feet From The N Line and 660 Feet From The E Line  
Section 28 Township 22S Range 36E NMPM Lea County

7. Lease Name or Unit Agreement Name

South Eunice Unit

8. Well No. #37

9. Pool name or Wildcat  
Eunice 7 Rurs Area SO.

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: Install Liner + Return to Reg. ☒

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.

12-8-89 Disregard previous NOI to temporary abandon. Work to run liner was completed as approved on 10-23-89.

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

SIGNATURE W W Baker TITLE \_\_\_\_\_ DATE \_\_\_\_\_

TYPE OR PRINT NAME W W Baker TELEPHONE NO. \_\_\_\_\_

(This space for State Use)

FOR RECORD ONLY

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE JAN 02 1990

CONDITIONS OF APPROVAL, IF ANY: