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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

|                                           |                              |
|-------------------------------------------|------------------------------|
| 5a. Indicate Type of Lease                |                              |
| State <input checked="" type="checkbox"/> | Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.              |                              |
| B-1167                                    |                              |

## 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 - I" (FORM C-101) FOR SUCH PROPOSALS.)

|                                                                                                                                                                                                            |  |                                                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------|
| 1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <u>Int. well</u>                                                                                     |  | 7. Unit Agreement Name<br><u>NMFU</u>                                |
| 2. Name of Operator<br><u>CONOCO INC.</u>                                                                                                                                                                  |  | 8. Farm or Lease Name<br><u>Langlie Lynn Queen Unit</u>              |
| 3. Address of Operator<br><u>P. O. Box 460, Hobbs, N.M. 88240</u>                                                                                                                                          |  | 9. Well No.<br><u>10</u>                                             |
| 4. Location of Well<br>UNIT LETTER <u>0</u> <u>640'</u> FEET FROM THE <u>South</u> LINE AND <u>1650</u> FEET FROM<br>THE <u>East</u> LINE, SECTION <u>22</u> TOWNSHIP <u>23S</u> RANGE <u>36E</u> N.M.P.M. |  | 10. Field and Pool, or Wildcat<br><u>Langlie Mathis 7 Rurs Queen</u> |
| 15. Elevation (Show whether DF, RT, GR, etc.)                                                                                                                                                              |  | 12. County<br><u>Lea</u>                                             |

|                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 16. 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"/><br>TEMPORARILY ABANDON <input type="checkbox"/><br>PULL OR ALTER CASING <input type="checkbox"/><br>OTHER <input type="checkbox"/> | PLUG AND ABANDON <input checked="" type="checkbox"/><br>CHANGE PLANS <input type="checkbox"/><br>REMEDIAL WORK <input type="checkbox"/><br>COMMENCE DRILLING OPNS. <input type="checkbox"/><br>CASING TEST AND CEMENT JOB <input type="checkbox"/><br>OTHER <input type="checkbox"/> |

17. 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.

- ① MIRU, pull RBP @ 3584' out of hole. Bad csg interval (321'-1236') can circ. up surf. csg
- ② Set CIBP @ 3600'. Circ. hole full of 9.0 ppg. brine
- ③ Pump 10 sxs class "c" w/ 2% CaCl<sub>2</sub> and displace w/ 13.3 bbls 9.0 ppg. brine. (145' of cmt on top of CIBP)
- ④ Spot 145' cmt plug from 2925'-3070 w/ 10 sxs class "c" cmt w/ 2% CaCl<sub>2</sub>. Displace w/ 11.3 bbls 9.0 ppg. brine
- ⑤ Spot 360' cmt plug from 940'-1300' w/ 25 sxs class "c" cmt w/ 2% CaCl<sub>2</sub>. Displace w/ 3.5 bbls 9.0 ppg. brine. Poolt w/ workstring and circ. out any excess cmt.
- ⑥ WOC for at least 4 hrs
- ⑦ If top of plug is below 1150'; spot another 25 sxs of class "c". If top of plug is above 1150'; circulate surf. cmt plug as follows:
  - a. Establish circ. down 4 1/2" prod. csg and up 7 1/8" surf. csg w/ 9.0 ppg brine
  - b. Pump 250 sxs class "c" cmt w/ 2% CaCl<sub>2</sub> + 4 sxs floccle (cont.)

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

SIGNED Jerry Sexton TITLE Administrative Supervisor DATE 1-22-86

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT 1 SUPERVISOR

DATE JAN 24 1986

RECEIVED

JAN 23 1986

U.S. DEPT. OF JUSTICE  
HONORS OFFICE