

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. 300252461800
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

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 Water Injection

2. Name of Operator
Conoco Inc.

7. Lease Name or Unit Agreement Name

South Eunice Unit

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

8. Well No. 64

9. Pool name or Wildcat
Eunice 7 Rivers Queen South

4. Well Location
Unit Letter A : 660' Feet From The north Line and 660' Feet From The east Line
Section 33 Township 22S 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: Install Fiberglass liner ☒

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.

It is proposed to reperforate the injection intervals and run a fiberglass liner to seal off water loss above these intervals as follows:

1. Reperforate 3608'-3720' with 94 shots.
2. Fill hole with frac sand up to 3610'.
3. Run 7 jts. fiberglass liner and set at 3603'.
4. Squeeze liner w/300 sxs cement.
5. Drill out retainer and clean out wellbore to 3830'.
6. Acidize with 50 bbls 15% NEFE.
7. Return to injection.

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

SIGNATURE

Jerry W. Hoover

TITLE

Regulatory Coordinator

DATE 4-18-91

TYPE OR PRINT NAME

Jerry W. Hoover

TELEPHONE NO. 915-686-6548

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT SUPERVISOR

APPROVED BY

TITLE

DATE

APR 22 1991

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

APR 22 1991

OFFICE
HONORARY CHIEF