Submit 3 Copies To Appropriate District	State of New Mexico			Form C-103	
Office District I	Energy, Minerals and Natural Resources			Revised March 25, 1999	
1625 N. French Dr., Hobbs, NM 88240				WELL API NO. 30025-35045	
District II 811 South First, Artesia, NM 88210	OIL CONSERVATION DIVISION			5. Indicate Type	of Lease
District III 1000 Rio Brazos Rd., Aztec, NM 87410		2040 South Pacheco			💢 fee 🗆
District IV	Santa Fe, NM 87505				Gas Lease No.
2040 South Pacheco, Santa Fe, NM 87505					
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A					or Unit Agreement Name:
(DO NOT USE THIS FORM FOR PROPOSE DIFFERENT RESERVOIR. USE "APPLIC	TOMCAT '16'	STATE			
PROPOSALS.)					
1. Type of Well					
Oil Well Gas Well Control Operator	Oulei			7. Well No.	
CONCHO RESOURCES INC.					10
3. Address of Operator				8. Pool name o	
110 W. LOUISIANA STE 410; MIDLAND TX 79701				WILDCAT; B	ONE SPRING
4. Well Location					
Unit Letter _B :7	61 feet from the NC	RTH_lir	ne and1881	_feet from the	EAST line
Continu 16	Township 2	3S Ra	nge 32E	NMPM LI	EA County
Section 16	10. Elevation (Show w				LA County
也是是是我的意思。	3679' GR				
11. Check A	ppropriate Box to Ind	licate Na			
NOTICE OF IN				SEQUENT <u>R</u> E	
PERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDIAL WOR	к 🗆	ALTERING CASING L
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRI	LLING OPNS. 🗌	PLUG AND ABANDONMENT
PULL OR ALTER CASING	MULTIPLE		CASING TEST A	ND 🗆	
	COMPLETION		CEMENT JOB		,
OTHER:			OTHER: SET IN	TERM CSG	<b>7</b>
12. Describe proposed or complete	ed operations. (Clearly sta	ate all per	tinent details, and g	give pertinent dates	s, including estimated date
of starting any proposed work)	SEE RULE 1103. For N	Multiple C	Completions: Attac	h wellbore diagran	n of proposed completion
or recompilation.					
09/28/00 RIH W/ 8-5/8", 32#, S80	ST&C CSG & SET @ 4	1816'. CI	MT W/ LEAD: 120	00 SX 50/50 POZ	C + ADDITIVES;
TAIL: 200 SX CLASS C	C + ADDITIVES. CIRC 1	80 SX TO	O PIT. WOC 12 H	RS.	
, ,					
Liereby certify that the information above is true and complete to the best of my knowledge and belief.					
Thereby certally that the manufacture of	- 1		, , , , , , , , , , , , , , , , , , ,	84	
SIGNATURE / (X)	1	_TITLE	Production	Analyst DA'	TE_10/03/ <u>00</u>
Type or print name Terri S	tathem			Telephone N	o. 915-683-7443
(This space for State use)				· · · · · · · · · · · · · · · · · · ·	
APPPROVED BY		TITLE	OR SY CHRIS VIL	SNi-il-L	DATE
Conditions of approval, if any:	ŞB¹C¹¹!	101, 51-57 Vii (13)	SUPERVISOR		