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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. E-6622
7. Unit Agreement Name
8. Farm or Lease Name NORTH EL MAR UNIT
9. Well No. 43
10. Field and Pool, or Wildcat EL MAR DELAWARE
12. County LEA

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-
2. Name of Operator Conoco Inc.
3. Address of Operator P. O. Box 460, Hobbs, New Mexico 88240
4. Location of Well UNIT LETTER <u>C</u> <u>543</u> FEET FROM THE <u>NORTH</u> LINE AND <u>2108</u> FEET FROM THE <u>WEST</u> LINE, SECTION <u>36</u> TOWNSHIP <u>26S</u> RANGE <u>32E</u> NMPM.
15. Elevation (Show whether DF, RT, GR, etc.)

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <u>DRILL OUT CIBP</u> <input checked="" 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 1108.

MIRU 3/21/84. CO TO 4614'. DRILLED OUT CIBP @ 4614'. CO TO 4677'. RAN PRODUCTION EQUIPMENT. Pmpd 0 BO, 95 BW, 0 MCF IN 24 HRS 5/4/84.

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

SIGNED Wm A. Butler TITLE Administrative Supervisor DATE 6/12/84
ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR

APPROVED BY _____ TITLE _____ DATE JUN 14 1984

RECEIVED
JUN 17 1984
O.C.B.
HOBS C-11-1