NO. OF COPIES RECEIVED		
DISTRIBUTION		Form C-103
SANTA FE	NEW MEXICO OIL CONSERVATION COMMISSION	Supersedes Old C-102 and C-103
FILE	TE I ME ATOO OIL CONSERVATION COMMISSION	Effective 1-1-65
U.S.G.S.		
LAND OFFICE		5a. Indicate Type of Lease
OPERATOR		State Fee
	•	5. State OII & Gas Lease No.
SUNDR	Y NOTICES AND DEPORTS ON WELLS	F-6622
	Y NOTICES AND REPORTS ON WELLS  PROSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.  ION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)	
OIL GAS		7. Unit Agreement Name
2. Name of Operator	OTHER- INJection Shut:In	
CONOCO INC.		8. Farm or Lease Name
3. Address of Operator		North El Mar Unit
P. O. Box 460, Hobbs, N.M. 88240		9. Well No.
4. Location of Well		10. Field and Pool, or Wildcat
UNIT LETTER	544 FEET FROM THE NOrth LINE AND 1448 FEET F	NOM El Mar Delaware
		minimini Milli
THE LUT LINE, BECTIO	N_36_ TOWNSHIP_265_ RANGE_32E_ NM	M = M = M = M = M = M = M = M = M = M =
	15, Elevation (Show whether DF, RT, GR, etc.)	
	( ) and whether Dr., R1, GR, etc.)	12. County
Check A	Inpropriate Roy To I. II	Lea
NOTICE OF IN	Appropriate Box To Indicate Nature of Notice, Report or	Other Data
	SUBSEQUE	NT REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON REMEDIAL WORK	
TEMPORARILY ABANDON	COMMENCE DRILLING OPNS.	ALTERING CASING
PULL OR ALTER CASING	CHANGE PLANS CASING TEST AND CEMENT JOB	PLUG AND ABANDONMENT
l.a.		
отнея	porary abandon V	
7. Describe Proposed or Completed Ope	rations (Clearly state all pertinent details, and give pertinent dates, includ	
work) SEE RULE 1 fos.	y trade are petitinent detaits, and give pertinent dates, includ	ing estimated date of starting any proposed
( MIDI POOL		
WIRD. TOOH WI	injection equip. Run bit & scraper	to perfs
(2) Set CIBP @ 4	560' Test CIRP + 1000 2: 1-1	1 1
(00.00' [	1560'. Test CIBP to 1000 psi. Load & 10 minutes. If csg doesn't test, a sqz' full of 9.0 ppg brine (pkr fluid)	press, test csq to
600 psi tor	10 minutes. It csg doesn't test, a sgz	procedure will follow
3) Circ. hole.	tull of 9.0 ppg bring (ake (1))	
(A) Dia dans	//) or we char \$1018)	•
a king down		
. I hereby certify that the information ab	ove is true and complete to the best of my knowledge and belief.	
ENED TEUM LORD	Administrative Supervisor	11-4-81
ORIGINAL SIGNED BY J		% B alb a second
PROVED BY DESTRICT   SUPER	TITLE	NOV 6 1986
NDITIONS OF APPROVAL IS ANY		