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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>E-6622</b>
7. Unit Agreement Name
8. Farm or Lease Name <b>North El Mar Unit</b>
9. Well No. <b>62</b>
10. Field and Pool, or Wildcat <b>El Mar Delaware</b>
12. County <b>Lea</b>

## 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. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> <b>Injection shut-in</b>
2. Name of Operator <b>CONOCO INC.</b>
3. Address of Operator <b>P. O. Box 460, Hobbs, N.M. 88240</b>
4. Location of Well UNIT LETTER <b>H</b> <b>1829</b> FEET FROM THE <b>North</b> LINE AND <b>330</b> FEET FROM THE <b>East</b> LINE, SECTION <b>36</b> TOWNSHIP <b>26S</b> RANGE <b>32E</b> 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 ☐  
TEMPORARILY ABANDON ☐  
PULL OR ALTER CASING ☐  
OTHER ☒ **temporary abandon**

PLUG AND ABANDON ☐  
CHANGE PLANS ☐

REMEDIAL WORK ☐  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOBS ☐  
OTHER ☐

ALTERING CASING ☐  
PLUG AND ABANDONMENT ☐

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. POOH w/ injection equip. Run bit & scraper to perms.
- ② Set CIBP @ 4560'. Test CIBP to 1000 psi. Load & press. test csg to 600 psi for 10 minutes. IF csg doesn't test sqz procedure will follow.
- ③ Circ. hole full of 9.0 ppg brine (pkr fluid).
- ④ Rig down

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

SIGNED *Kenneth H. Hayes* TITLE Administrative Supervisor

DATE 11-4-86

ORIGINAL SIGNED BY JERRY SEITZ

APPROVED BY DISTRICT SUPERVISOR

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

N. M. O. C. - Hobbs