

## OIL CONSERVATION DIVISION

2040 Pacheco St.  
Santa Fe, NM 87505

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

WELL API NO.  
30025-34674

Indicate Type of Lease

STATE ☒

FEE ☐

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.)

Type of Well:

OIL  
WELL ☒

GAS  
WELL ☐

OTHER

Name of Operator

CONCHO RESOURCES INC.

Well No.

1

Address of Operator

110 W. LOUISIANA STE 410; MIDLAND TX 79701

Pool name or Wildcat

DELAWARE BRUSHY CANYON

Well Location

Unit Letter I : 2310 Feet From The SOUTH Line and 660 Feet From The EAST Line

Section 5 Township 24S Range 33E NMPM LEA County

Elevation (Show whether DF, RKB, RT, GR, etc.)

3611

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: ☐

#### SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ANBANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

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.

CONCHO RESOURCES INC. RESPECTFULLY REQUESTS APPROVAL TO P&A THE CONCHO '5' STATE COM NO. 1 WELL  
ACCORDING TO THE FOLLOWING PROCEDURE:

1. RIH W/ 5-1/2" CIBP & SET @ 7800 W/ 35' SX CMT ON TOP. CUT OFF CSG @ +/- 3300' & POOH W/ 5-1/2" CSG.
2. SPOT 25 SX OR 100' PLUG ACROSS 8-5/8" CSG SHOE @ 4965'. TAG PLUG.
3. SPOT 130' PLUG ACROSS CSG C/O.
4. SPOT 25 SX OR 100' PLUG ACROSS 11-3/4" CSG SHOE @ 633'. TAG PLUG.
5. SPOT 100' CMT PLUG AROSS TOP OF SALT @ 1300'. 50' ABOVE & BELOW.
6. 10 SX SURFACE PLUG. INSTALL DRY HOLE MARKER.

THE COMMISSION MUST BE NOTIFIED 24  
HOURS PRIOR TO THE BEGINNING OF  
PRODUCTION OPERATIONS AND MUST  
BE APPROVED

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

SIGNATURE

TITLE PRODUCTION ANALYST

DATE 12-08-99

TYPE OR PRINT NAME TERRI STATHEM

TELEPHONE NO. 915-683-7443

(This space for State Use)

ORIGINAL SIGNED BY CHRIS WILLIAMS  
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: