

CLSF
JP

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

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-015-03556
Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
State Oil & Gas Lease No.
Lease Name or Unit Agreement Name Turkey Track Sec. 3
Well No. 2
Pool name or Wildcat

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	
Name of Operator Webb Oil Company	
Address of Operator P. O. Box 1124, Artesia, NM 88211-1124	
Well Location Unit Letter <u>C</u> : <u>660</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>West</u> Line <u>3</u> Section <u>19S</u> Township <u>29E</u> Range <u>NMPM</u> <u>Eddy</u> County	
Elevation (Show whether DF, RKB, RT, GR, etc.) 3419	

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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.

- 05/14/01 Spot 30 sx class "C" neat cmt. @ 2016 ft. WOC 4 hrs. Tagged plug @ 1876 ft. Circ. hole w/ mud laden fluid.
- 05/15/01 Perf 7 in. csg. @ 1200 ft. Pressured up to 2000 PSI Spot 30 sx class "C" neat cmt. @ 1248 ft. WOC 4 hr.s. Tagged plug @ 1080 ft.
- 05/15/01 Perf 7 in. csg. @ 375 ft. Circ. 140 sx. class "C" neat cmt. down 7 in. csg. & up to surf. of 8 5/8 csg. Install Dry hole marker.



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

SIGNATURE Roger Brooks TITLE AGent DATE 05-15-01

TYPE OR PRINT NAME Roger Brooks TELEPHONE NO. 915-580-7161

(This space for State Use)

APPROVED BY [Signature] TITLE Wild Sup ID DATE DEC 11 2002

CONDITIONS OF APPROVAL, IF ANY