

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
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30-015-22277

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. 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.)

1. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator
Meteor Developments, Inc

3. Address of Operator
511 16th Street, Ste. 400, Denver CO 80202

4. Well Location
Unit Letter L : 2210 Feet From The South Line and 990 Feet From The West Line

Section 20 Township 22 South Range 27 East NMPM Eddy County

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

3140' G.L. & 3150' K.B.

11. 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 ABANDONMENT ☒
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

12. 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.

10/28/98 Ran and set CIBP @ 3220'. Set tubing @ 3220' and pumped 25 Sx cement plug 3220'-1806'.

10/29/98 Cut and pulled 5 1/2" casing at 810'. Ran tubing to 1240' and pumped 75 Sx cement plug. W.O.C. Ran wireline and tagged TOC @ 687'. Pulled tubing to 476'. Pumped 146 Sx cement circulating cement to surface. Will cut 4 1/2" casing below ground level and erect P & A marker due North of well with correct information identifying well and where to locate well bore by footage.

Post ID-2
6-11-99
PVA

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

SIGNATURE Mike Stapp TITLE Field Rep. II DATE Feb. 9. 99

TYPE OR PRINT NAME TELEPHONE NO.

(This space for State Use)

APPROVED BY Mike Stapp TITLE Field Rep. II DATE Feb 9. 99

CONDITIONS OF APPROVAL, IF ANY: