

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

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.

30-015-28429

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.)

7. Lease Name or Unit Agreement Name

B & B

1. Type of Well:

OIL  
WELL ☒

GAS  
WELL ☐

OTHER ☐

2. Name of Operator

Nearburg Producing Company

8. Well No.

#3

3. Address of Operator

P. O. Box 823085, Dallas, TX 75382-3085

9. Pool name or Wildcat

Dagger Draw; Upper Penn, North

4. Well Location

Unit Letter A : 660 Feet From The North Line and 660 Feet From The East Line

Section 22

Township 19S

Range 25E

NMPM

Eddy County

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

3,469' GR

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

REMEDIAL WORK ☐

ALTERING CASING ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

PULL OR ALTER CASING ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

OTHER: Extension Request ☒

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.

Request extension from originally approved application.

APPROVAL  
PERMIT BY 4/5/96  
UNLESS DRILLING UNDERWAY

RECEIVED

OCT 03 1995

OIL CON. DIV.

DIST. 2

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

SIGNATURE

Paulette Houston

TITLE

Admin. Asst.

DATE 10/02/95

TYPE OR PRINT NAME

Paulette Houston

TELEPHONE NO. 505/397-4186

(This space for State Use)

APPROVED BY

Jim W. Gunn

TITLE

DATE

10/6/95

CONDITIONS OF APPROVAL, IF ANY: