

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 Brinos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL API NO.
30-031-20150

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Santa Fe Railroad

8. Well No.

23

9. Pool name or Wildcat

South Hospah Lower Sand

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 ☐ GAS ☐ OTHER Injector

2. Name of Operator
B C & D Operating, Inc.

3. Address of Operator
PO Box 837, Hobbs, NM 88241

4. Well Location
Unit Letter C : 5 Feet From The North Line and 1330 Feet From The West Line
Section 7 Township 17N Range 8W NMPM McKinley County

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

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.

2-15-96, MIRU pulling unit, pull one joint tbg., reset pkr @ 1499', pressure tested tbg/csg annulus @ 500 Psig., held okay, released pkr and circulated pkr fluid down tbg/csg annulus, set pkr @ 1499' (perfs 1519-1590') tested tbg/csg annulus @ 500 Psig, held okay, nu well head, rig down. Shut-in pending MIT. The well is needed for pressure maintenance.

RECEIVED
APR 12 1996
OIL CON. DIV.
DIST. 3

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

SIGNATURE Donnie Hill TITLE President DATE 4/4/96

TYPE OR PRINT NAME Donnie Hill TELEPHONE NO. (505) 397-3972

(This space for State Use)

APPROVED BY Johnny Robinson TITLE REPORT ON 2 CTS PERMIT, DIST. 3 DATE APR 12 1996

CONDITIONS OF APPROVAL, IF ANY: