

Submit 3 Copies
to Appropriate
District Office

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

State of New Mexico
Energy, Minerals and Natural Resources Department

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

Form C-103
Revised 1-1-89

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.)		WELL API NO. 30-045-28131
1. Type of Well: OIL WELL ☐ GAS WELL ☒ OTHER		5. Indicate Type of Lease STATE ☐ FEE ☒
2. Name of Operator Robert L. Bayless		6. State Oil & Gas Lease No.
3. Address of Operator P.O. Box 168, Farmington, NM 87499		7. Lease Name or Unit Agreement Name Santa Rosa 6
4. Well Location Unit Letter <u>N</u> : <u>1055</u> Feet From The <u>South</u> Line and <u>990</u> Feet From The <u>West</u> Line Section <u>6</u> Township <u>29N</u> Range <u>9W</u> NMPM San Juan County		8. Well No. 2
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 5650' GL; 5660' RKB		9. Pool name or Wildcat Basin Fruitland Coal

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: ☒	

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.

To comply with BLM's cementing requirements, attached please find a copy of the cementing report furnished by Halliburton Services.

RECEIVED
OCT 18 1990
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 Kevin H. McCord TITLE Petroleum Engineer DATE 10-16-90

TYPE OR PRINT NAME: Kevin H. McCord

TELEPHONE NO. 505/326-2650

(This space for State Use)

APPROVED BY Original Signed by FRANK T. CHAVEZ

SUPERVISOR DISTRICT # 3

DATE OCT 23 1990

CONDITIONS OF APPROVAL, IF ANY:

HALLIBURTON SERVICES JOB SUMMARY

FORM 2025

HALLIBURTON DIVISION VENICE, CO

HALLIBURTON LOCATION FRUIT, N.M.

BILLED ON 02/26/11
TICKET NO. 022611

WELL DATA

FIELD _____ SEC. _____ TWP. _____ RNG. _____ COUNTY SAN JUAN STATE N.M.

FORMATION NAME _____ TYPE _____

FORMATION THICKNESS _____ FROM _____ TO _____

INITIAL PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD

PRESENT PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD

COMPLETION DATE _____ MUD TYPE _____ MUD WT. _____

PACKER TYPE _____ SET AT _____

BOTTOM HOLE TEMP. _____ PRESSURE _____

MISC. DATA _____ TOTAL DEPTH _____

	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING	<u>N</u>	<u>105</u>	<u>4 1/2</u>	<u>0</u>	<u>2756</u>	
LINER						
TUBING						
OPEN HOLE			<u>7 7/8</u>	<u>0</u>	<u>7700</u>	SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR		
FLOAT SHOE		
GUIDE SHOE		
CENTRALIZERS		
BOTTOM PLUG		
TOP PLUG <u>5 in</u>	<u>1</u>	<u>Induced</u>
HEAD <u>60PC</u>	<u>1</u>	<u>"</u>
PACKER		
OTHER		

MATERIALS

TREAT. FLUID _____ DENSITY _____ LB./GAL. API

DISPL. FLUID _____ DENSITY _____ LB./GAL. API

PROP. TYPE _____ SIZE _____ LB.

PROP. TYPE _____ SIZE _____ LB.

ACID TYPE _____ GAL. _____

ACID TYPE _____ GAL. _____

ACID TYPE _____ GAL. _____

SURFACTANT TYPE _____ GAL. _____ IN

WE AGENT TYPE _____ GAL. _____ IN

FLUID LOSS ADD. TYPE _____ GAL.-LB. _____ IN

GELLING AGENT TYPE _____ GAL.-LB. _____ IN

FRIC. RED. AGENT TYPE _____ GAL.-LB. _____ IN

BREAKER TYPE _____ GAL.-LB. _____ IN

BLOCKING AGENT TYPE _____ GAL.-LB. _____

PERFPAC BALLS TYPE _____ QTY. _____

OTHER _____

OTHER _____

JOB DATA

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <u>9-30</u>	DATE <u>9-30</u>	DATE <u>9-30</u>	DATE <u>9-30</u>
TIME <u>0700</u>	TIME <u>0700</u>	TIME <u>0735</u>	TIME <u>1540</u>

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>D. Dain</u>	<u>36714</u>	<u>FRUIT</u>
<u>D. Webster</u>	<u>5293-P</u>	<u>"</u>
<u>R. N. Juic</u>	<u>7481</u>	<u>"</u>
<u>J. Wigley</u>	<u>4183</u>	<u>Durham</u>
		<u>65010</u>

DEPARTMENT INT

DESCRIPTION OF JOB

INT 410 L.S.

JOB DONE THRU: TUBING ☐ CASING ☒ ANNULUS ☐ TSG./ANN. ☐

CUSTOMER REPRESENTATIVE X Kevin McLeod

HALLIBURTON OPERATOR D. Dain

COPIES REQUESTED 1

CEMENT DATA

STAGE	NUMBER OF BAGS	TYPE	API CLASS	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
	<u>25</u>	<u>STANDARD</u>				<u>meat</u>	<u>1.18</u>	<u>15.6</u>
	<u>90</u>	<u>STANDARD</u>				<u>2% Iron white</u>	<u>2.08</u>	<u>12.5</u>
	<u>350</u>	<u>50/0 B</u>	<u>50/0</u>	<u>B</u>	<u>13</u>	<u>2% 106, 10% Salt</u>	<u>1.26</u>	<u>13.6</u>

PRESSURES IN PSI

SUMMARY

VOLUMES

CIRCULATING _____ DISPLACEMENT _____ PRESUR: BBL.-GAL. 10 TYPE water

BREAKDOWN _____ MAXIMUM _____ LOAD & BKDN: BBL.-GAL. _____ PAD: BBL.-GAL. _____

AVERAGE _____ FRACTURE GRADIENT _____ TREATMENT: BBL.-GAL. _____ DISPL. BBL.-GAL. 35.5

SHUT-IN: INSTANT _____ 5-MIN. _____ CEMENT SLURRY: BBL.-GAL. 5.25-70-79

HYDRAULIC HORSEPOWER _____ TOTAL VOLUME: BBL.-GAL. _____

ORDERED _____ AVAILABLE _____ USED _____

AVERAGE RATES IN BPM _____

TREATING _____ DISPL. _____ OVERALL _____

CEMENT LEFT IN PIPE _____

FEET 43 REASON SHOE

REMARKS

See Job Log

CUSTOMER

JOB LOG

CUSTOMER _____ PAGE NO _____

PUMPS	PRESSURE (PSI)	DESCRIPTION OF OPERATION AND MATERIALS
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FORM 2013 R-2

[illegible]

CUSTOMER