

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.	30-045-28131
5. Indicate Type of Lease	STATE ☐ FEE ☒
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name Santa Rosa 6	
8. Well No.	2
9. Pool name or Wildcat	Basin Fruitland Coal
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 5650' GL; 5660' RKB	

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
Robert L. Bayless

3. Address of Operator
P.O. Box 168, Farmington, NM 87499

4. Well Location
Unit Letter N : 1055 Feet From The South Line and 990 Feet From The West Line
Section 6 Township 29N Range 9W NMPM San Juan County

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.

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

RECEIVED

FEB 20 1992

OIL CON. DIV.
DIST. 3

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. 505/326-2659

(This space for State Use)

APPROVED BY Original Signed by FRANK T. WATKINS TITLE SUPERVISOR DISTRICT #3 DATE OCT 28 1990

CONDITIONS OF APPROVAL, IF ANY:

HALLIBURTON SERVICES JOB SUMMARY

HALLIBURTON
LOCATION

FMCTN, N.M.

BILLED ON
TICKET NO. 079611

FORM 1013

WELL DATA

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

FORMATION NAME	TYPE	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
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 _____							

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR		
FLOAT SHOE		
GUIDE SHOE		
CENTRALIZERS		
BOTTOM PLUG		
TOP PLUG <u>5 W</u> <u>8 4 1/2</u> <u>1</u> <u>INDUCED</u>		
HEAD <u>LOPK</u> <u>4 1/2</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

HE 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

CALLER 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>0400</u>	TIME <u>0700</u>	TIME <u>0235</u>	TIME <u>1940</u>

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>D. D. Dain</u>	<u>36714</u>	<u>FMCTN</u>
<u>D. Webster</u>	<u>2233-P</u>	<u>"</u>
<u>R. N. N. N.</u>	<u>7481</u>	<u>"</u>
<u>J. WIGLEY</u>	<u>4183</u>	<u>Durham</u>

DEPARTMENT INT

DESCRIPTION OF JOB INT 4 1/2 L.S.

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

CUSTOMER REPRESENTATIVE X Kevin M. Cold

HALLIBURTON OPERATOR D. 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>50/10 B</u>	<u>50/10</u>	<u>B</u>		<u>7% 60, 10% Salt</u>	<u>1.26</u>	<u>13.6</u>

PRESSURES IN PSI

SUMMARY

VOLUMES

CIRCULATING _____ DISPLACEMENT _____ PRESURIZ. BBL.-GAL. 10 TYPE water

BREAKDOWN _____ MAXIMUM _____ LOAD & BKN: BBL.-GAL. _____ PADI 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 5100

REMARKS

See Job Log

CUSTOMER

FORM 2013 R-2

JOB TYPE

DESCRIPTION OF OPERATION AND MATERIALS

[illegible]

CUSTOMER