

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.

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 ☐ Salt Water Disposal Well  
OTHER

2. Name of Operator  
BASIN DISPOSAL, INC.

3. Address of Operator c/o Walsh Engr. & Prod. Corp.  
P. O. Drawer 419 Farmington, N.M. 87499

4. Well Location  
Unit Letter F : 2207 Feet From The North Line and 1870 Feet From The West Line  
Section 3 Township 29N Range 11W NMPM San Juan County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
5710' GL

7. Lease Name or Unit Agreement Name

Disposal

8. Well No.

1

9. Pool name or Wildcat

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: Acid Treatment ☒

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.

August 9, 1990

Treat well with 7056 gallons, 7.0%, HCL acid. Average treating pressure - 1360 psig, minimum treating pressure - 1330 psig, maximum treating pressure 1430 psig. Average injection rate 2.80 BPM. Injection pressure before treatment - 1420 psig. After treatment - 1300 psig.

RECEIVED  
AUG 10 1990

FOR: BASIN DISPOSAL, INC.

OIL CON. DIV  
DIST. 3

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

SIGNATURE

Ewell N. Walsh, P.E.

TITLE

Agent

DATE 8/9/90

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

Original Signed by CHARLES GHULSON

DEPUTY OIL & GAS INSPECTOR, DIST. #3

DATE AUG 10 1990

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY: