

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.)

7. Lease Name or Unit Agreement Name

SUNCO DISPOSAL

1. Type of Well:

OIL
WELL ☐

GAS
WELL ☐

OTHER

DISPOSAL X

2. Name of Operator

COLEMAN OIL & GAS COMPANY

3. Address of Operator

708 SOUTH TUCKER, FARMINGTON, NM 87401

8. Well No.

#1

9. Pool name or Wildcat

FLORA VISTA MESA VERDE

4. Well Location

Unit Letter E : 1595 Feet From The NORTH Line and 1005 Feet From The WEST Line

Section

2

Township

29N

Range

12W

NMPM

SAN JUAN

County

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

5859 GR.

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: RUN STEP-RATE INJECTION TEST ☒

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 run step-rate injection test to determine maximum rate and pressure limits.
We ask for 1000# surface limit at present.

RECEIVED

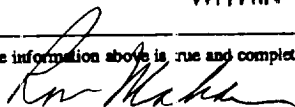
FEB 28 1992

OIL CON. DIV
DIST. 3

APPROVAL EXPIRES _____
UNLESS DRILLING IS COMMENCED
SPUD NOTICE MUST BE SUBMITTED
WITHIN 10 DAYS.

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

SIGNATURE



TITLE

CONTRACTS MANAGER

DATE

02-28-92

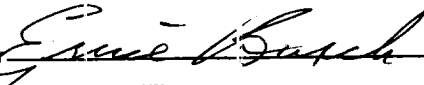
TYPE OR PRINT NAME

RON MAHAN

TELEPHONE NO. 327-4961

(This space for State Use)

APPROVED BY



TITLE

DEPUTY OIL & GAS INSPECTOR, DIST. 3

DATE

MAR 05 1992

CONDITIONS OF APPROVAL, IF ANY:

REVISED

1987-88

GO. MONTANA

State

GOVERNMENT OF MONTANA
DEPARTMENT OF REVENUE
TAXATION DIVISION
HARBOUR