

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

RECONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088
JAN 17 1996

OIL CON. DIV.

WELL API NO.
5. Indicate Type of Lease STATE ☐ FEE ☐
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name SWD WELL (CLASS I) W.D
8. Well No. #1
9. Pool name or Wildcat

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

2. Name of Operator
GIANT REFINING COMPANY - BLOOMFIELD

3. Address of Operator
P.O. BOX 159.

4. Well Location
Unit Letter I : 2442 Feet From The SOUTH Line and 1250 Feet From The EAST Line
Section 27 Township 29 Range 11 NMPM 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.

GIANT REFINING COMPANY - BLOOMFIELD PROPOSES TO RESTIMULATE THE REFERENCED WELL BY ACIDIZING THE CLIFFHOUSE AND UPPER MENESEE FORMATIONS. AFTER SUCCESSFUL ACIDIZING, A STEP RATE INJECTION TEST. IF CONDITIONS WARRANT FURTHER ACTION, THE 2 7/8" 6.5# CEMENT LINED PRODUCTION TUBING WILL BE PULLED AND A 2 3/8" WORK STRING WILL BE PLACED. A S.P.I.T. TOOL WILL BE USED TO ISOLATE EACH OF THE SEVEN PERFORATED SECTIONS. THE WORK STRING WILL BE REMOVED AND THE ORIGINAL PRODUCTION TUBING WILL BE RUN INTO THE HOLE. AT COMPLETION, A

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

SIGNATURE Lynn Shelton TITLE ENVIRONMENTAL MANAGER DATE 1-17-96
TYPE OR PRINT NAME LYNN SHELTON TELEPHONE NO. 505 632 801

(This space for State Use)

APPROVED BY Johnny Robinson DEPUTY OIL & GAS INSPECTOR, DIST. #3 DATE JAN 17 1996
CONDITIONS OF APPROVAL, IF ANY:

MECHANICAL INTEGRITY TEST WILL BE PERFORMED.