

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

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO. 30-025-30994

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

Hileman

1. Type of Well:
OIL WELL GAS WELL OTHER

8. Well No.

1

2. Name of Operator
Grand Banks Energy Company

9. Pool name or Wildcat

Wildcat

3. Address of Operator
#10 Desta Drive, Suite 500 East, Midland, Texas 79705

4. Well Location
Unit Letter J : 2100 Feet From The South Line and 2100 Feet From The East Line
Section 13 Township 9S Range 34E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4195' GRD

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: Still in completion phase

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.

Ran GR-CBL-CCL from 9030' to 6800' (TOC @ 7050')

Perf Abo Lime 8936' to 9005', 12' (2 SPF)

Acidized w/ 5000 gals. 15% NEFE, presently swabbing back load water as of 10/31/90

Delete "13" from lease name

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

SIGNATURE Carlton Wheeler TITLE Vice President-Operations DATE 10/31/90

TYPE OR PRINT NAME Carlton Wheeler TELEPHONE NO. 915/682-10

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL IF ANY:

RECEIVED

NOV 01 1990

CCP
HQSAS OFFICE