

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.

30-025-28613

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

004762

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

State 27

1. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

2. Name of Operator

Coastal Oil & Gas Corporation

8. Well No.

3

3. Address of Operator

9 Greenway Plaza #2751, Houston, TX 77046

9. Pool name or Wildcat

Talk Abo & Talk Penn

4. Well Location

Unit Letter A : 990 Feet From The North Line and 1300 Feet From The East Line

Section 27

Township 14-S

Range 32-E

NMPM

Lea County

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

4317 KB

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: downhole commingle ☐

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.

6/26 Well producing 1.5 BO, 10 BWPD, from ABO zone

6/27 - POH w/pump, Rods & TBG. TIH w/Retrieving tool to recover/RBP @ 9000' Latch RBP. Tag PBTD @ 9888' POH.

6/28 - Perforate ABO 8588' - 8952' & Penn 9606' - 9764'. Acidize w/8100 gal 15% NEFE acid

6/29 - Testing

7/13 - Initial oil production

8/13 - Final Potential 1959 BO, 5555 BWPD

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

SIGNATURE

Deborah Moore

TITLE

Env. & Safety Analyst

DATE

9/16/92

TYPE OR PRINT NAME

Deborah Moore

TELEPHONE NO.

877-7590

(This space for State Use)

ORIGINAL SIGNED BY GERRI WILLIAMS
DISTRICT SUPERVISOR

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: