## State of New Mexico Energy, Minerals and Natural Resources Department

| I. ntan | C·1m     |
|---------|----------|
| Revise  | d 1-1-89 |

| la Appropriale<br>District Office                              | Energy, Minerals and Pato  | Int Vezonices Debutation              |                               | Kenisea I.            | 1.87    |  |
|--|--|---------------------------------------|-------------------------------|-----------------------|---------|--|
| DISTRICT  <br>P.O. Box 1980, 1106bs, NM 88240                  | OIL CONSERVA'  | WELL API NO.                          |                               |                       |         |  |
| DISTRICT II  |  | Santa Fe, New Mexico 87504-2088       |                               | 30-025-03778          |         |  |
| P.O. Drawer DD, Artesia, NM 88210                              | - ,  |                                       | 5. Indicate Type of           | STATEXX               | FEE 🗌   |  |
| DISTRICTIII<br>1000 Rio Diazos Rd., Aziec, NM 87410            |  |                                       | 6. State Oil & Clas           | Lease No.<br>2411     |         |  |
| SUNDRY NOTI  | CES AND REPORTS ON   | WELLS                                 |                               |                       |         |  |
| ( DO NOT USE THIS FORM FOR PAC<br>DIFFERENT RESER<br>(FORM C-  | DPOSALS TO DRILL OR TO DE<br>AVOIR, USE "APPLICATION FO<br>-101) FOR SUCH PROPOSALS. | R PERMIT                              | 7. Lease Name or              | Unit Agreement Name   |         |  |
| 1. Type of Well:   |  |                                       | Lovingto                      | n San Andres          | Unit    |  |
| ALT OU ALT   | onex In  | jection                               | 8. Well No.                   |                       |         |  |
| 2. Name of Operator  GREENHILL PETROLEUM CO                    | ORPORATION   |                                       | 8. Well 140.                  | 4                     |         |  |
| 3. Address of Operator   |  |                                       | 9. Pool name or W             |                       | 1       |  |
| 11490 WESTHEIMER, SUIT   | TE 200/HOUSTON, TEXA   | AS 77077-6841                         | Lovington G                   | rayburg San A         | ndres   |  |
| .,,  | O Feel From The North  | . Line and198                         | O Feet From                   | The East              | Line    |  |
| Section 36   | Township 16S   | Range 36E                             | ИМРМ                          | Lea                   | County  |  |
|  |  | heiher DF, RKB, RT, GR, etc.)         |                               |                       |         |  |
|  | /////  |                                       |                               | Millimi               |         |  |
| II. Check A  | Appropriate Box to Indic<br>ENTION TO:   |                                       | eport, or Other<br>SEQUENT FI |                       |         |  |
|  |  | REMEDIAL WORK                         | П                             | ALTERING CASING       |         |  |
| PERFORM REMEDIAL WORK  | PLUG AND ABANDON   |                                       |                               |                       |         |  |
| TEMPORARILY ABANDON  | CHANGE PLANS   | COMMENCE DRILLING                     |                               | PLUG AND ABANDO       | NMENI L |  |
| PULL OR ALTER CASING   |  | CASING TEST AND CE                    | MENT JOB                      |                       |         |  |
| OTHER:   |  | OTHER: Pressur                        | e test                        |                       | [XX     |  |
| 12. Describe Proposed or Completed Operat work) SEE RULE 1103. | lone (Clearly state all pertinent dete   | ails, and give persinent dates, inclu | ling estimated date of        | starting any proposed |         |  |
|  | er at 4568'. Tested<br>36'. Tested to 500#   |                                       | GPC had to                    | reset                 |         |  |
|  |  |                                       |                               |                       |         |  |
| -  | •  |                                       |                               |                       |         |  |
|  |  |                                       |                               |                       |         |  |
|  |  |                                       |                               |                       |         |  |
|  |  | ng.                                   |                               |                       |         |  |
|  |  | "                                     |                               |                       |         |  |
|  |  |                                       |                               |                       |         |  |
| I hereby certify that the information above is true            |  | lge and belief.<br>THU Land Manager/P | ermian Rasii                  | 8-25-                 | 93      |  |
| SIGNATURE  | my   | _ TIME Dand Handger/I                 |                               | (713)                 | 589-848 |  |
| TYTEORPHOTHAME Michael   | l J. Newport   |                                       |                               | тегенюне но.          |         |  |
| (This space for State Use)                                     |  |                                       |                               |                       |         |  |
| ODICINAL SE  | GNED BY JERRY SEXTON   |                                       |                               | AUG 31                | 1993    |  |
| AMROVED BYDISTR  | HCT I SUPERVISOR   | _ TITLE                               |                               | DATE                  |         |  |
|  |  |                                       |                               |                       |         |  |

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OFFICE



