

Submit 3 Copies To Appropriate
District Office
TRICT I
25 N. French Dr., Hobbs, NM 88240
TRICT II
South First, Artesia NM 88210
TRICT III
10 Rio Brazos Rd., Aztec, NM 87410
TRICT IV
10 S. Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-10
Revised March 25, 199

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

WELL API NO.
30-025-23089-00-00

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name:

MAXWELL

8. Well No.
002

9. Pool name or Wildcat SWD
~~GLADIOLA WOLFCAMP, S POOL~~
~~(20120)~~ Penn-Miss-Devonian

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)

Type of Well:

Oil Well ☒ Gas Well ☐ Other SWD

Name of Operator

Kevin O. Butler & Associates, Inc.

Address of Operator

POB 1171, Midland, TX 79701

Well Location

Unit letter E : 2310 feet from the North line and 990 feet from the WEST line

Section 6

Township 13S

Range 38E

NMPM

LEA

County

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

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 ☐
WELL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER: Remedial Assessment

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐

OTHER:

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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

PERFORM MIT PER OCD REQUIREMENTS

E-SET PACKER AT 9478' ABOVE (TOP PERFS 9578'-9682')

E-STORE BACK TO SWD

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

SIGNATURE [Signature] TITLE President DATE October 29,
2001

Type or print name Kevin O. Butler

Telephone No. 915/682-1178

This space for State use)

APPROVED BY _____ TITLE _____
Conditions of approval, if any:

CHIEF ENGINEER BY
CHRIS WILLIAMS

DATE
OCT 30 2000

BEFORE EXAMINER
OIL CONSERVATION DIVISION
OCD EXHIBIT NO. 125
CASE NO. 12758-A