STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease: State ☐ Fee ☒
5. 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.)

1. OIL WELL ☐ GAS WELL ☒ OTHER- Carbon Dioxide
7. Unit Agreement Name
2. Name of Operator: SCHWARTZ CARBONICS
8. Farm or Lease Name: Norman & Esther Libby
3. Address of Operator: Box 37, Solano, New Mexico 87746
9. Well No.: Libby 4
4. Location of Well: UNIT LETTER I, 1980 FEET FROM THE South LINE AND 660 FEET FROM THE East LINE, SECTION 16 TOWNSHIP 20 N RANGE 31 E NMPM.
10. Field and Pool, or Wildcat: Bueyeros
15. Elevation (Show whether DF, RT, GR, etc.): GL - 4590
12. County: Harding

16. 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 ☐		COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	CHANGE PLANS ☐	CASING TEST AND CEMENT JOB ☐	
OTHER ☐		OTHER Repair casing leaks. Slim hole complete. ☒	

17. 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.

Tested 4 1/2" casing to 915'. Could not get tested. Ran Guiberson Uni-2 packer. Tubing was plugged. 3' perforated nipple. 2 3/8" 4.7# J-55 tubing. Set packer at 1841'. Cement tubing inside 4 1/2" casing with 115 sacks Class C cement. Circulated 25 sacks to the pit, WOC 24 hrs. Drilled out inside of the tubing with 1.850" bit and placed well back in production.

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

SIGNED R. M. Huckabay TITLE Regional Production Manager DATE 11-12-84

APPROVED BY _____ TITLE _____ DATE 11-26-84

CONDITIONS OF APPROVAL, IF ANY: