

NEW MEXICO OIL CONSERVATION COMMISSION

AUG 11 11 34 AM '66

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5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.
E-7481

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- | 7. Unit Agreement Name |
| 2. Name of Operator Coastal States Gas Producing Company | 8. Farm or Lease Name L. L. & E. State |
| 3. Address of Operator P. O. Box 235, Midland, Texas | 9. Well No. 2 |
| 4. Location of Well UNIT LETTER L , 485 FEET FROM THE west LINE AND 1980 FEET FROM THE south LINE, SECTION 22 TOWNSHIP 9-S RANGE 33-E NMPM. | 10. Field and Pool, or Wildcat Flying "M" San Andres |
| 15. Elevation (Show whether DF, RT, GR, etc.) GR 4351' | 12. County Lea |

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK

TEMPORARILY ABANDON

PULL OR ALTER CASING

OTHER

PLUG AND ABANDON

CHANGE PLANS

REMEDIAL WORK

COMMENCE DRILLING OPNS.

CASING TEST AND CEMENT JOB

OTHER

ALTERING CASING

PLUG AND ABANDONMENT

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.

SPUD DATE: 12:00 p.m. 8-1-66

Ran 8 jts (251') 8-5/8", 24#, J-55 casing. Set at 264' with 150 sacks Class "A", plus 2% CaCl. Plug down at 9:15 p.m. Cement circulated. Tested casing with 1100# - held OK. WOC 13-1/2 hours.

CASING WAS CEMENTED WITH OPTION NO. 2 AS FOLLOWS:

- Volume of cement slurry - 210 cubic feet.
- Dowell Class "A" Cement w/2% CaCl.
- Approximate temperature of slurry - 90°.
- Estimated minimum formation temperature - 95°.
- Estimate of cement strength at time of testing - 1020# per sq inch.
- Actual time cement in place, prior to starting cement test - 13-1/2 hours.

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

SIGNED Joe R. Howard TITLE Div. Prod. Supt. DATE August 3, 1966

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: