

NEW MEXICO OIL CONSERVATION COMMISSION

|                        |  |
|------------------------|--|
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| LAND OFFICE            |  |
| OPERATOR               |  |

|   |                              |
|---|------------------------------|
| 5a. Indicate Type of Lease                        |                              |
| State <input checked="" type="checkbox"/>         | Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.<br>B-2516            |                              |
| 7. Unit Agreement Name<br>SMGSAU                  |                              |
| 8. Farm or Lease Name<br>Tract 6                  |                              |
| 9. Well No.<br>5                                  |                              |
| 10. Field and Pool, or Wildcat<br>Maljamar (G-SA) |                              |
| 12. County<br>Lea                                 |                              |

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 <input type="checkbox"/>                               |
| 2. Name of Operator<br>Cities Service Company  |
| 3. Address of Operator<br>Box 1919 Midland, TX 79702   |
| 4. Location of Well<br>UNIT LETTER K 1330 FEET FROM THE South LINE AND 1330 FEET FROM THE West CORNER, SECTION 29 TOWNSHIP 17S RANGE 33E NMPM. |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br>4051' GR  |

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

NOTICE OF INTENTION TO:

|  |   |
|--|---|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     |
| PULL OR ALTER CASING <input type="checkbox"/>  | OTHER <input type="checkbox"/>            |

SUBSEQUENT REPORT OF:

|   |   |
|---|---|
| REMEDIAL WORK <input type="checkbox"/>              | ALTERING CASING <input type="checkbox"/>  |
| COMMENCE DRILLING OPNS. <input type="checkbox"/>    | PLUG AND ABANDONMENT <input type="checkbox"/>   |
| CASING TEST AND CEMENT JOB <input type="checkbox"/> | OTHER <input checked="" type="checkbox"/> Witnessed casing leak survey & identification of above ground connections from casingheads. |

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 1103.27

Dug out cellar. Installed riser to surface from one valve on each casinghead. Installed a second valve on each riser above ground and properly identified each, as required and witnessed by NMOCD. Melyin Crossland with NMOCD witnessed and approved the installations. Backfilled cellar.

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

|                                 |  |                         |
|---------------------------------|--|-------------------------|
| SIGNED <u>[Signature]</u>       | TITLE <u>Region Operations Manager</u> | DATE <u>3/9/79</u>      |
| APPROVED BY <u>[Signature]</u>  | TITLE <u>OIL &amp; GAS INSPECTOR</u>   | DATE <u>MAR 13 1979</u> |
| CONDITIONS OF APPROVAL, IF ANY: |  |                         |