

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.

30-025-33018

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Buffalo 2K State Com

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. Type of Well:

OIL
WELL ☐

GAS
WELL ☒

OTHER

2. Name of Operator

Nearburg Producing Company

8. Well No.

#1

3. Address of Operator

P. O. Box 823085, Dallas, TX 75382-3085

9. Pool name or Wildcat

Quail Ridge Morrow, North

4. Well Location

Unit Letter K : 1,980 Feet From The South Line and 1,960 Feet From The West Line

Section 2

Township 19S

Range 33E

NMPM

Lea

County

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

3,740' GR

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 ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Intermediate casing and cement ☒

12. 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.

Drld to 5,310'. C&C mud. POH and LD 8" DC's. Run 119 jts 8-5/8" 24# and 32# J-55 and S-80 casing. Set casing at 5,310'. C&C mud and cement casing using 2,300 sx cement. Circ 61 sx cement to surface. WOC, cut-off casing and weld on wellhead.

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

SIGNATURE

Paulette Houston

TITLE

Admin Assnt

DATE 08/08/95

TYPE OR PRINT NAME

Paulette Houston

TELEPHONE NO. 505/397-4186

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

AUG 23 1995