

Submit 3 Copies
to Appropriate
District Office

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

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

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

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

WELL API NO. 30025-22572

5. Indicate Type of Lease
STATE FEE

6. State Oil & Gas Lease No.
V-284

7. Lease Name or Unit Agreement Name

Hot Tamale State

8. Well No.
1

9. Pool name or Wildcat West Aside MaNew
Undesignated S. E. 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. Type of Well:
OIL WELL GAS WELL OTHER

2. Name of Operator
Nearburg Producing Company

3. Address of Operator
P. O. Box 31405, Dallas, Texas 75231-0405

4. Well Location
Unit Letter A : 660 Feet From The north Line and 660 Feet From The east Line

Section 34 Township 20S Range 35E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3680' 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:

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.

- Set CIBP @ 13,400'. Dump 35' of cement on plug.
- Cut 5-1/2" casing @ 13,000' and pull. Set 75 sx plug @ stub; 50' in and 50' out.
- Spot 50 sx plugs every 2000' to 5500'.
- Spot 50 sx plug @ base of 9-5/8" @ 5500'; 50' in and 50' out.
- Spot 50 sx plug @ top of salt (2000').
- Spot 10 sx plug @ surface and install dry hole marker.
Hole to be filled with 10# brine mixed with 25# gel per barrel.

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

SIGNATURE Eddie J. Gelwick TITLE Operations Coordinator DATE 11/3/89

TYPE OR PRINT NAME Eddie J. Gelwick

TELEPHONE NO. 214/739-1778

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

NOV 6 1989

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE BEGINNING OF OPERATIONS FOR THE C-103 TO BE APPROVED.