

## District I

1625 N. French Dr., Hobbs, NM 88240

## District II

1301 W. Grand Ave., Artesia, NM 88210

## District III

1000 Rio Brazos Rd., Aztec, NM 87410

## District IV

1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural ResourcesOIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

May 27, 2004

WELL API NO.  
30-025-025695. Indicate Type of Lease  
STATE ☒ FEE ☐6. State Oil & Gas Lease No.  
B-116107. Lease Name or Unit Agreement Name  
Wilson State

8. Well Number 17

9. OGRID Number

10. Pool name or Wildcat  
Wilson Yates 7 Rvrs Assoc.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 Water Supply2. Name of Operator  
Hal J. Rasmussen Operating, Inc.3. Address of Operator  
550 W. Texas, Suite 200, Midland, TX 797014. Well Location  
Unit Letter A : 330 feet from the North line and 330 feet from the East line  
Section 23 Township 21S Range 34E NMPM County Lea11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3682 GLPit or Below-grade Tank Application ☐ or Closure ☐

Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface water \_\_\_\_\_

Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material \_\_\_\_\_

## 12. 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 ☐ MULTIPLE COMPL ☐

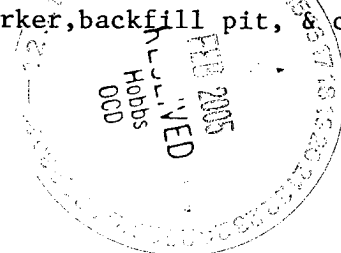
## SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☒  
CASING/CEMENT JOB ☐OTHER: ☐OTHER: ☐

13. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

2-04-05 1. Notify NMOCD Buddy Hill, 2-05-05 2. Tag CIBP @ 3402'. 3. Spot 25 sx cmt. 3402-3257'. 4. Spot 25 sx cmt. w/ 2% CaCl @ 1700'. WOC & tag TOC @ 1540'. 5. Sqz. 45 sx cmt. under pkr. @ 700' thru perfs. @ 910-940' @ 2 BPM @ 250 PSI. Displaced TOC to 860' SIP @ 0 PSI. 2-07-05 6. Tag TOC @ 916', sqz. 45 sx cmt. w/ 2% CaCl @ 2 BPM @ 500 PSI. Displaced TOC to 860' SIP @ 0 PSI. WOC & tag TOC @ 850'. 7. Perforate @ 195'. Mix & sqz. 120 sx cmt. down 7" csg. Had communication up 7" csg. X surface csg. Leave 7" csg. full as per NMOCD Billy P. 2-08-05. Tag TOC @ 90'. 8. Circ. 20 sx cmt. 90' to surface. 9. RDMO. Cut wellhead & deadmen, install dry hole marker, backfill pit, & clean location.

Approved as to plugging of the Well Bore.  
Liability under bond is retained until  
surface restoration is completed.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE \_\_\_\_\_ TITLE Agent DATE 2-10-05

Type or print name Roger Massey

E-mail address:

Telephone No. 432-530-0907

For State Use Only

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of Approval (if any):

OCD FIELD REPRESENTATIVE II/STAFF MANAGER