

Submit 1 Copy To Appropriate District Office
District I – (575) 393-6161
1625 N. French Dr., Hobbs, NM 88240
District II – (575) 748-1283
811 S. First St., Artesia, NM 88210
District III – (505) 334-6178
1000 Rio Brazos Rd., Aztec, NM 87410
District IV – (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised July 18, 2013

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-025-20386
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. NM-29707
7. Lease Name or Unit Agreement Name Whitten SWD
8. Well Number 1
9. OGRID Number 15878
10. Pool name or Wildcat SWD Seven Rivers

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK FOR A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well ☐ Gas Well ☒ Other SWD

2. Name of Operator
New Mexico Salt Water Disposal

3. Address of Operator
P.O. Box 1518, Roswell, NM 88202-1518

4. Well Location
Unit Letter I : 1980 feet from the South line and 660' feet from the East line
Section 14 Township 20S Range 34E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3649' GL 3671' KB

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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

07.29.14. – Failed H5 casing integrity test. Witnessed by Bill Sonnamaker. 07.31.14: Set plug in profile nipple. Load casing with 1/4 BFW. Load tubing with 7 BFW. Pressure up to 250# on tubing. TP, CP equalized. Release pressure. RD pump truck. Fish plug. RD slickline. 08.04.14: RU slickline. RIH w/slickline and set plug in profile nipple @3818'. Shear off of profile nipple and POOH w/slickline. RU pump truck. Load tubing w/6 BFW then RU on casing. Load with 1/4 BFW. Pressure up to 530# and hold for 30 minutes. Held pressure okay. Tubing, casing pressure equalized. Release pressure. RD pump truck. RIH w/slickline and fish plug. POOH & RD slickline. SWI.

Propose to RIH w/wireline and cut fiberglass tubing approximately 4' above packer. POOH w/fiberglass tubing laying down in singles. PU & RIH w/overshot, 2 7/8" OD steel tubing. Latch onto packer. Release packer. POOH w/2 7/8" tubing laying down in singles. PU & RIH w/2 7/8" x 9 5/8" nickle plated tension packer, 2 7/8" PC L80 steel tubing to 3818'. Circulate packer fluid to surface. Set packer @ 3818'. NUWH. RU pump truck on backside. Pressure test casing, tubing annulus to 500#. If casing holds, RDMOSU. Put well back in operation.

Spud Date: 08/27/1963 Rig Release Date: 09/06/1963

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

SIGNATURE _____ TITLE _____ DATE _____

Type or print name _____ E-mail address: _____ PHONE: _____

For State Use Only

APPROVED BY: Bill Sonnamaker TITLE: Staff Manager DATE: 8/6/2014
Conditions of Approval (if any):

FOR RECORD ONLY

AUG 06 2014

FOR RECORD ONLY

138 Oct 8/6/2014

