

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

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.)		WELL API NO. 30-025-24771
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/> SWD		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Kaiser-Francis Oil Company		6. State Oil & Gas Lease No. E-9458
3. Address of Operator P. O. Box 21468, Tulsa, OK 74121-1468		7. Lease Name or Unit Agreement Name North Bell Lake Unit 4
4. Well Location Unit Letter <u>K</u> : <u>1980</u> feet from the <u>South</u> line and <u>1980</u> feet from the <u>West</u> line Section <u>8</u> Township <u>23S</u> Range <u>34E</u> NMPM <u>Lea</u> County		8. Well Number 15
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3474 GR		9. OGRID Number 012361
		10. Pool name or Wildcat SWD; Delaware

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input 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: Inspected/Replaced tbg & pkr <input checked="" 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.

2/22/18 - 2/27/18

1. Flowed well back to tanks to reduce surf pressure. MIRU WOR. ND WH. NU BOP.
2. Released pkr & TOOH - laying down. Found connections to be corroded on the top 3 jts.
3. TIH w/ new 2 7/8" IPC tbg & new 2 7/8" x 7 5/8" AD-1 packer (externally nickel-coated & internally plastic-coated).
4. Loaded backside w/pkr fluid. Set pkr at same depth as before. ND BOP. NU WH w/string in tension.
5. Tested 2 7/8" x 7 5/8" annulus to 580# for 30 minutes without pressure loss. Charted test. Chart attached.
6. Obtained NMOCD approval & returned to injection.

Spud Date:

Rig Release Date:

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

SIGNATURE

Charlotte Van Valkenburg

TITLE Mgr., Regulatory Compliance

DATE 3/6/18

Type or print name Charlotte Van Valkenburg

E-mail address: Charlottv@kfoc.net

PHONE: 918-491-4314

For State Use Only

APPROVED BY:

Mary L Brown

TITLE

AO/II

DATE

3/19/2018

Conditions of Approval (if any):

MIDNIGHT

NOON



CHART NO. MC MP-1000

METER _____

CHART PUT ON _____

TAKEN OFF _____

LOCATION _____

REMARKS

Bell Lake 4-15, MGT

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