

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 August 1, 2011

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

WELL API NO.

30-015-45127

5. Indicate Type of Lease

STATE FEE

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Orphan Well MW

8. Well Number 002

9. OGRID Number

10. Pool name or Wildcat

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 Unknown ☒ **HOBBS COO**

2. Name of Operator

State of New Mexico

3. Address of Operator

1625 N. French Drive Hobbs, NM 88249

4. Well Location

Unit Letter E: \_\_\_\_\_ feet from the \_\_\_\_\_ line and \_\_\_\_\_ feet from the \_\_\_\_\_ line

Section 16 Township 16S Range 29E NMPM Eddy County

**RECEIVED**

**AUG 20 2018**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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

NOTICE OF INTENTION

PERFORM REMEDIAL WORK ☐

TEMPORARILY ABANDON ☐

PULL OR ALTER CASING ☐

DOWNHOLE COMMINGLE ☐

**INT TO PA**

**P&A NR**

**P&A R**

OTHER: \_\_\_\_\_

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

COMMENCE DRILLING OPNS. ☐

CASING/CEMENT JOB ☐

ALTERING CASING ☐

P AND A XX

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

**SEE ATTACHED**

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: M. White TITLE P.E.S. DATE 08/20/2018

Conditions of Approval (if any):

**Plugging Report  
Orphan Well MW #2  
API 30-015-45127**

8/9/2018            Cleared location and install two temporary anchors. Rigged up and moved equipment. Installed wellhead and POOH with 6 joints of tubing and bottom hole assembly. SN was at 193'. EOT was at 215'. RIH with workstring and found bottom at 215'. POOH and SION.

~~8/10/2018~~            Caught weak circulation from 215' with 7 bbls fresh water. Pumped 25 sx with CaCl. Had circulation but no cement to surface. POOH with tubing and WOC 4 hrs. RIH and tagged cement at 189'. Circulated cement to surface with 20 sx. POOH and rigged down. Dug out and cut off. Filled up 5 ½" casing to surface with less than 1 sack. Installed marker.