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State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

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

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

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

WELL API NO.
30-007-20096

5. Indicate Type of Lease
STATE ☐   FEE ☒

6. State Oil & Gas Lease No.

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.)

7. Lease Name or Unit Agreement Name
Castle Rock South 3017

1. Type of Well:
OIL WELL ☐   GAS WELL ☐   OTHER Coal methane

2. Name of Operator
Pennzoil Exploration & Production Company

8. Well No.
021-M

3. Address of Operator
P.O. Box 2967, Houston, TX 77252

9. Pool name or Wildcat
Wildcat

4. Well Location

Unit Letter __M__ : ___660___ Feet From The ____South____ Line and ___715___ Feet From The ____West____ Line

Section 02   Township 31N   Range 17E   NMPM   Colfax   County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
8265 GR

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☒
PULL OR ALTER CASING ☐		CASING TEST AND CEMENT JOB ☐	
OTHER:_____ ☐		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.

8/28/91 Start of work.
1. Remove surface equipment, pull rods and tubing.
2. Set CIBP @ 1622" w/2 sks (18') class A @ 15.6 ppg on plug.
3. Set CIBP @ 1404' w/12 sks (108') class A @ 15.6 ppg. Fill to surface w/9.2 ppg Gel mud.
4. Place 6 sks (50') surface plug w/class A 15.6 ppg.
5. Place well marker, fill pits, remove junk and debris from location.
6. Casing left in well: 44.5' of 11 3/4", 42 lb/ft set @ 44.5'
                       331' of 8 5/8", 24 lb/ft set @ 331'
                       1862' of 5 1/2", 17 lb/ft set @ 1862'

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

SIGNATURE _____ TITLE Operations Superintendent DATE 9/5/91

TYPE OR PRINT NAME   L. D. Williamson

TELEPHONE NO. 376-2817

(This space for State Use)

APPROVED BY _____   TITLE DISTRICT SUPERVISOR DATE 9-20-91

CONDITIONS OF APPROVAL, IF ANY: