

Submit 3 Copies To Appropriate District  
Office  
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 Resources

Form C-103  
May 27, 2004

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



WELL API NO. 30 015 34366		
5. Indicate Type of Lease STATE FEE X		
6. State Oil & Gas Lease No.		
7. Lease Name or Unit Agreement Name Pardue Farms "29"		
8. Well Number 2		
9. OGRID Number 15262		
10. Pool name or Wildcat Und. Willow Lake Bone Springs		

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 X Gas Well Other

2. Name of Operator  
Morexco, Inc.

3. Address of Operator  
c/o P.O. Box 953, Midland, TX 79702

4. Well Location  
Unit Letter F : 1980 feet from the North line and 1650 feet from the West line  
Section 29 Township 24S Range 28E NMPM Eddy County

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

Pit 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:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB	
OTHER: <input type="checkbox"/>		OTHER: Perforate & treat	

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.

- 3-27-08: Rigged up wireline and perforated from 4662,63,6,68,69,70,73,74,76,77,83,84,90,91' w/14 holes. Set 5 1/2" packer @ 4347'. Swabbing. Rigged up BJ & pumped 2000 gals 7 1/2" acid.
- 3-29/31-08: Swabbed.
- 4-3-08: Fraced well w/985 bbls 30# x-linked 2% KCL water w/34812# 30/50 sand + 11200# 20/40 sand.
- 4-4-08: Ran 148 jts, 2 7/8" tubing. Left flowing to battery.
- 4-7-08: Ran pump and rods and left pumping.
- 4-9-08: Getting load back, making 0 oil, 145 mcf & 337 bbls water.

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 X, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Ann E. Ritchie TITLE Regulatory Agent DATE 6-16-08

Type or print name: Ann E. Ritchie E-mail address: ann.ritchie@wtor.net Telephone No. 432 684-6381  
**For State Use Only**

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
Conditions of Approval (if any): \_\_\_\_\_

Accepted for record - NMOCD