

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

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

WELL API NO. 30-015-29232
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 28123
7. Lease Name or Unit Agreement Name Happy Valley "29"
8. Well No. 34
9. Pool name or Wildcat Happy Valley Delaware
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3322' D.F.

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 ☐

2. Name of Operator
LOUIS DREYFUS NATURAL GAS CORP.

3. Address of Operator
14000 Quail Springs Parkway, Suite 600, Oklahoma City, OK

4. Well Location
Unit Letter O : 660 Feet From The South Line and 1680 Feet From The East Line
Section 29 Township 22S Range 26E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3322' D.F.

11. 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 checked="" type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

Well spud @ 1:00 p.m. 7-7-97.

Casing as follows:

1. Drilled 17½" hole to 355'. Set 355' of 11 3/4" H-40 42# ST&C csg. Cemented w/400 sx. Class "C" w/2% CaCl₂; 50 sx. RFC w/2% CaCl₂; 50 sx. Class "C" w/4% CaCl₂. Cmt. circulated to surface. Tstd. hydril and csg. to 1000 psi for 30 min.
2. Drilled 11" to 1650'. Set 1650' of 7 5/8" L-80 26.4# csg. Cemented w/512 sx. "C" + 4% gel + 2% CaCl₂, tail w/225 sx. "C" + 2% CaCl₂; 250 sx. "C" + 4% CaCl₂. Cmt. circulated to surface.
3. Drilled 6 1/2" hole to 4857'. Set 4857' of 4 1/2" K-55 11.6# csg. Cmt. 1st stage w/220 sx. Self Stress 10/10 + 2% CaCl₂ + 1/4# Cello Flake. DVT tool set @ 3235'. Circulated 8 hrs. between stages. Cmt. 2nd stage w/200 sx. 35/65 POZ "C" + 6% gel + 1/4# Cello Flake, tail w/230 sx. Self Stress 10/10 + 2% CaCl₂. Closed DVT. Cmt. circulated to surface. Csg. tstd. to 1000# for 15 min.

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

SIGNATURE Terrye D. Bryant TITLE Regulatory Technician DATE 1-16-98
TYPE OR PRINT NAME Terrye D. Bryant TELEPHONE NO. 405-749-5287

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY TIM W. GUM TITLE DISTRICT II SUPERVISOR DATE 1-27-98
CONDITIONS OF APPROVAL, IF ANY: