

DISTRICT I

1625 N. French Dr., Hobbs, NM 88240

DISTRICT II

1301 W. Grand Ave., Artesia, NM 87210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

DISTRICT IV

1220 S. St. Francis Dr., Santa Fe, NM 87505

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

WELL API NO.

30-039-06612

5. Indicate Type of Lease

STATE ☐

FEE ☐

6. State Oil & Gas Lease No.

**Federal**

7. Lease Name or Unit Agreement Name

**JICARILLA**

8. Well No.

**4**

9. Pool name or Wildcat

**BLANCO MESA VERDE/TAPACITO PICTURED CLIFFS**

**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

**CORDILLERA ENERGY, INC.**

3. Address of Operator

**5802 HIGHWAY 64, FARMINGTON, NEW MEXICO 87401**

4. Well Location

Unit Letter

**E : 1550**

Feet From The

**NORTH** Line and

**890**

Feet From The

**WEST** Line

Section

**8**

Township **26N**

Range **05W**

NMPM

County

**RIO ARRIBA**

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

**7326' RKB**

11.

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

**NOTICE OF INTENTION TO:**

PERFORM REMEDIAL WORK

☐

PLUG AND ABANDON

☐

TEMPORARILY ABANDON

☐

CHANGE PLANS

☐

PULL OR ALTER CASING

☐

MULTIPLE  
COMPLETION

☐

OTHER:

☐

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK

☐

ALTERING CASING

☐

COMMENCE DRILLING OPNS.

☐

PLUG & ABANDONMENT

☐

CASING TEST & CEMENT JOB

☐

OTHER:

**Downhole Commingle**

☒

12. Describe Proposed or Completed Operations  
(proposed work) SEE RULE 1103.

(Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any  
For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

04/16/2003

Commingle accomplished. Packer removed and new 2-3/8" tubing set @ 7806.52'  
Order #DHC 1120AZ.

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

SIGNATURE

*Kay S. Eckstein*

TITLE

PRODUCTION TECHNICIAN

DATE

18-Apr-03

TYPE OR PRINT NAME

KAY S. ECKSTEIN

TELEPHONE NO. (505) 632-8056

(This space for State Use)

APPROVED BY

*[Signature]*

TITLE

DEPUTY OIL & GAS INSPECTOR, DIST. #1

DATE

APR 21 2003

CONDITIONS OF APPROVAL, IF ANY: