

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

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

DISTRICT I
1000 Rio Brazons Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, New Mexico 87505

WELL API NO.

30-045-08705

5. Indicate Type of Lease

STATE

☐ Federal

FEE

☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Martin A

8. Well No.

#1

9. Pool name or Wildcat

Basin Dakota

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

GAS

WELL ☐

WELL ☒

OTHER

2. Name of Operator

Thompson Engineering

OGRD # 037581

3. Address of Operator

c/o Walsh Engineering, 7415 East Main Street, Farmington, NM 87402

4. Well Location

Unit Letter J : 1775' Feet From The South Line and 1575' Feet From The East Line

Section 3 Township 29N Range 11W NMPM San Juan County

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

6006' GR

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

11. NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG & ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent date, including estimated date of starting any proposed work).
SEE RULE 1103.

11/2/04 Rigged up a service unit. Found the tubing parted. Fished out all of the tubing and cleaned out the well to PBTD at 6551' KB. Isolated holes in the casing from 4985' to 2760' KB. TIH with a packer on 2-3/8" tubing. Set the packer at 5028' and the bottom of the tubing is at 6455' KB. Treated formation with 100 gal of 20% HCL. Swabbed 70 bbls of fluid from the formation. SI well for build-up and evaluation.

Return to Rule 201 compliance Before March 1 2005

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

SIGNATURE

Paul C. Thompson

TITLE President

DATE 12/01/04

TYPE OR PRINT NAME

Paul C. Thompson

TELEPHONE NO. (505) 327-4892

(This space for State Use)

APPROVED BY

Chal H

TITLE

SUPERVISOR DISTRICT # 3

DATE

DEC - 3 2004

CONDITIONS OF APPROVAL, IF ANY: