to Appendime
District Office

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103

DISTRICT

OIL CONSERVATION DIVISION WELL

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	_	 	

P.O. Box 1980, Hobbs, NM 88240	P.O. Box 2088 Santa Fe, New Mexico 87504-2088		30-039-23613		
DISTRICT.II			5. Indicate Type of L		
P.O. Drawer DD, Artesia, NM 88210			STATE FEE X		
DISTRICT III 1000 Rio Brazos Rd., Azzec, NM 87410	6. State Oil & Gas Lease No.				
CUNDRY NOTICE	S AND REPORTS ON WEL	18			
(DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVO (FORM C-101	7. Lease Name or Unit Agreement Name				
1. Type of Well: OIL OAS WELL X WELL	OU HON		Dr. Daddy	-0	
2. Name of Operator			8. Well No.	-0	
Oryx Energy Company			1		
3. Address of Operator			9. Pool same or Wild	icat	
P. O. Box 1861, Midland	, Texas 79702		Gavilan Man	cos	
4. Well Location Unit Letter _C : _910 Section 33			Feet From Ti		
	10. Elevation (Show whether 7233 GR				
11. Check Apr	propriate Box to Indicate	Nature of Notice, R	eport, or Other-D)2t2	
NOTICE OF INTE	• •	UBn	SECTION FE	FORT OF:	
		2545214			
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	IAR1 2 1990 AI		
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. PI	LUG AND ABANDONMENT L	
PULL OR ALTER CASING		CASING TEST A DU	MEON DIA	/• 	
OTHER:		OTHER:	DIST. 3		
12. Describe Proposed or Completed Operations work) SEE RULE 1103.	s (Clearly state all pertinent details, a	nd give pertinent dates, inclu	ding estimated date of st	arting any proposed	
1 WIRT DI					
1. MIRU PU. 2. KILL WELL W/OIL (I	NECESSARV)				
	HEAD. RLSE ANCHOR &	TOH W/2 7/8" T	BG.		
4. RIH W/5 1/2" CSG SG	CRAPER ON 2 7/8" TBG.	MAKE SEVERAL	PASSES ACROSS	PERFORATED	
INTERVAL 6747-7409					
5. RIH W/ASSEMBLY #1		. SET PKR @72			
	220-7409 UNTIL FLUID		PUMP CAPACITY	. RECORD	
STRING WEIGHT, SPM,	, FLUID RECOVERED, TI	MES & SAMPLES.		·	
	ATTEMPT TO KICK WELL	. OFF TO CONTINU	E SURGING.		
8. RLSE PKR & POH W/TH		_	ar o 7/oll mpo	CET DDD 67027	
9. RIH W/5 1/2" RBP, A	ASSEMBLY #2	O	N 2 //8" IBG.	SET RBP @7027.	
10. SET PKR @6733'.		(CONT	INUED PAGE 2)		
I hereby certify that the information above is true and	i complete to the best of my knowledge and	l belief.			
SIGNATURE MONIN L. 1	ers T	ne Proration A	nalyst	DATE 3/8/90	
ON TAI UPE	3				
TYPE OR PRINT NAME				TELEPHONE NO.	
(This space for State Use)					
•		iji ži bylon a me	100 da a	MAR 1 2 199	
APPROVED BY Original Signed by FRAM	IK T. USAVEZ	TLE	KI # I	- DATE WINIT L LIDO	

C-104 3/8/90

11. BACK SURGE PERFS 6747-7012 UNTIL FLUID WEIGHT EXCEEDS PUMP CAPACITY. RECORD STRING WEIGHT, SPM, FLUID RECOVERED, TIMES & SAMPLES

- 12. SWAB TUBING DOWN & ATTEMPT TO KICK WELL OFF TO CONTINUE SURGING.
- 13. RLSE PKR. LATCH RBP & POH.