

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**  
2040 Pacheco St.  
Santa Fe, NM 87505

WELL API NO.  
30451069300

5. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.  
E 8443

**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.)

7. Lease Name or Unit Agreement Name

State Gas Com M

1. Type of Well:  
OIL WELL ☐ GAS WELL ☒ OTHER

2. Name of Operator  
Cross Timbers Operating Company (CTOC)

8. Well No.  
1

3. Address of Operator  
6001 Hwy 64, Farmington, New Mexico 87401

9. Pool name or Wildcat  
Blanco Mesa Verde

4. Well Location  
Unit Letter L : 1040 Feet From The West Line and 990 Feet From The South Line

Section 16 Township 31N Range 12W NMPM San Juan County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
6,178' KB

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

**NOTICE OF INTENTION TO:**

**SUBSEQUENT REPORT OF:**

PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input 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.

CTOC proposes to determine casing integrity by the attached procedure.

**RECEIVED**  
MAR 12 1998

**OIL CON. DIV.**  
DIST. 3

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

SIGNATURE Loren W. Fothergill TITLE Loren W. Fothergill, Production Engineer DATE May 11, 1998

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

APPROVED BY Johnny Robinson TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #3 DATE MAR 12 1998

CONDITIONS OF APPROVAL, IF ANY:

Workover Procedure  
State Gas Com M 1  
Sec 16, T 31 N, R 11 W  
San Juan County New Mexico

Surface csg: 10 3/4" 32.75#, SW @ 517'. Cmt'd W/400 sx. Circ cmt to surf.  
Intermediate csg: 7", 20#, J-55 @ 4,858'. Cmt'd W/175 sx. TOC 3,760 (TS).  
Liner: 5" 15.5# J-55, fr/ 4,691' - 5,219'. Cmt'd W/ 75sx.  
Tbg: 2-3/8" 4.7#, H-40 & J-55 @ 4,917'.  
Perf: W/ 2 SPF, fr/ 4,914-44', 4,953-73', 4,980-96', 5,020-38', 5,072-82', 5,103-17',  
5,123-31', 5,142-48'.  
Current Status: Producing.

1. Contract Federal and State agencies prior to starting casing repair.
2. Install and test anchors on location.
3. MIRU. Check and record tubing, casing, and bradenhead pressures.
4. Blow well down and kill well with fresh water. Blow Bradenhead to pit.
5. ND wellhead. NU and pressure test BOP's.
6. TIH and tag PBTD (5192') check for fill. Tally tubing as TOH, checking condition of the tubing. If unable to move tbg. Call Loren Fothergill.
7. TIH with 6 1/4" bit to top of 5 1/2" liner @ 4,691'. TOH.
8. TIH with 7" Baker R -3 packer set @ 4,500'. Pressure test tbg/csg annulus.
9. Establish injection rate into leak and attempt to circulate to surface. Record rate and pressures. If no casing leak is found, contact Loren Fothergill.
10. Swab well in and RWTP.
11. RDMOL.