

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	
FILE	
U.S.O.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	

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.)

OIL WELL <input type="checkbox"/>	GAS WELL <input type="checkbox"/>	OTHER- Abandoned oil well
Name of Operator Tom R. Minihan		
Address of Operator P.O. Box 4364 Midland, Tx. 79704		
Location of Well UNIT LETTER C 660 FEET FROM THE north LINE AND 660 FEET FROM THE east LINE, SECTION 29 TOWNSHIP 9S RANGE 36 E NMPM.		

7. Unit Agreement Name
8. Farm or Lease Name Santa Fe "D"
9. Well No. 1
10. Field and Pool, or Wildcat Crossroads - Penn

15. Elevation (Show whether DF, RT, GR, etc.)	12. County Lea
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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"/>
FULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	

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.

1. MIRU Service Unit - Install BOP.
2. Drill out cement plugs inside 8 5/8" casing and 5 1/2" liner to 9650' TD 9635' Bottom 5 1/2" liner set at 9635'. Will test squeezes with 1000# while drilling out cement.
3. Log and reperforate 9618' - 26'. Acidize with 750 gals. 15% acid.
4. Swab test. If commercial will equip to pump and submit necessary form to obtain allowable.
5. Will commence work over as soon as possible after obtaining approval to do the work.

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

SIGNED Jerry Sexton TITLE Owner & Operator DATE 11/3/82

ORIGINAL SIGNED BY  
JERRY SEXTON

APPROVED BY DISTRICT 1 SUPR. TITLE  DATE NOV 10 1982

CONDITIONS OF APPROVAL, IF ANY: