

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.

30-025-07115

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. 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.)

1. Type of Well:

OIL
WELL ☐

GAS
WELL ☐

OTHER Dry Hole

2. Name of Operator

C. W. Trainer

3. Address of Operator

c/o Oil Reports & Gas Services, Box 755, Hobbs, NM 88241

8. Well No.

1

9. Pool name or Wildcat

Gladiola Devonian

4. Well Location

Unit Letter J : 1650 Feet From The South Line and 1650 Feet From The East Line

Section 31 Township 11S Range 38E NMPM Lea County

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

3885 GR

11

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☒

REMEDIAL WORK ☐

ALTERING CASING ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

PULL OR ALTER CASING ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

OTHER: ☐

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.

To confirm verbal approval from Jerry Sexton to plug as follows:

CIBP was set at 11,775 and capped with 35' cement 7/23/90.

Additional plugs to be set:

25 sacks 5700-5800

25 sacks 4073-4173

35 sacks 2800-2900

35 sacks 300-400

15 sacks at surface

Install dry hole marker

Clean and level location

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

SIGNATURE

Walter Weller

TITLE

Agent

DATE

7/27/90

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY

THIS DOCUMENT MUST BE NOTED IN THE
FILE FOR THE PROPOSED
PLUGGING OPERATIONS FOR THE
WELL.

AUG - 1 1990