

OIL CONSERVATION DIVISION

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

Form C-103  
Revised 10-1-78

|                        |  |
|------------------------|--|
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| SANTA FE               |  |
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| LAND OFFICE            |  |
| OPERATOR               |  |

3a. Indicate Type of Lease  
State  Fee   
5. State Oil & Gas Lease No.  
LG 2247

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO OPERATE OR PLUG BACK TO A DIFFERENT RESERVOIR.  
USE APPLICATION FOR PERMIT NO. 1 (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL  GAS WELL  OTHER

7. Unit Agreement Name

8. Farm or Lease Name  
Lonestar "AAI" State

9. Well No.  
1

10. Field and Pool, or wildcat  
Eight Mile Draw Permo Penn

11. Elevation (Show whether DF, RT, GR, etc.)  
4139.6' GR

12. County  
Lea

6. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

|  |  |  |   |
|--|--|--|---|
| NOTICE OF INTENTION TO:                        |  | SUBSEQUENT REPORT OF:                                |   |
| PERFORM REMEDIAL WORK <input 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 Perforate additional zone. <input checked="" type="checkbox"/> | CASING TEST AND CEMENT JOBS <input type="checkbox"/> | OTHER <input type="checkbox"/>                |

7. 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.

Propose to perforate interval 9998-10002' w/2 SPF - 8 holes.  
Will stimulate w/1500 gals 15% acid. Return well to production.

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

SIGNED Jerry Sexton TITLE Production Supervisor DATE 1-21-86

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON TITLE \_\_\_\_\_ DATE JAN 24 1986  
DISTRICT 1 SUPERVISOR

CONDITIONS OF APPROVAL, IF ANY: