

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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SANTA FE	
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U.S.G.S.	
LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION
P. O. BOX 2086
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-73

3a. Indicate Type of Lease	
State ☒	Fee ☐
3. State Oil & Gas Lease No.	

SUNDARY 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. ☒ OIL WELL ☐ GAS WELL ☐ OTHER-

2. Name of Operator
Nearburg Producing Company

3. Address of Operator
P.O. Box 31405, Dallas, Texas 75231

4. Location of Well
VERT LETTER P 400 FEET FROM THE South LINE AND 400 FEET FROM
THE East LINE, SECTION 24 TOWNSHIP 16S RANGE 36E NE. 1/4

7. Unit Agreement Name
8. Form or Lease Name Doubloon State 24P
9. Well No. 1
10. Field and Pool, or Wildcat NE Lovington-Pennsylvania
12. County Lea

15. Elevation (Show whether DF, RT, GR, etc.)
3840.7 GR.

4. 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 OPER.	☐ PLUG AND ABANDONMENT
☐ PULL OR ALTER CASING	☐ OTHER	☐ CASING TEST AND CEMENT JOB	☐ OTHER

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

5-29-88 SPUD @ 2:00 AM (MST)
6-1-88 RAN 10 joints, 13 3/8" 54.50# Surface casing set @ 363:
cemented with 400 sx Premium Plus, 2% cacl, 1/4# Flo-seal
per sack. Circulated 20 sx to Pit. plug own @ 12:45 pm
W.O.C. 18 hours
6-5-88 RAN 102 jts. of 24# & 32# intermediate casing. Set @ 4305'
cemented with 1675 sx HOWCO Lite, tailed in with 300 sx.
Premium Plus. Circulated 160 sx to Pit. plug down @ 1:05pm
WOC 18 hours

~~CONFIDENTIAL~~

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

Signed Eddie J. Schuch TITLE Operating Coordinator DATE 6-27-88

APPROVED BY DISTRICT SUPERVISOR TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

CONFIDENTIAL

RECEIVED

JUN 28 1988

DDO
HOBBS OFFICE