

District I 1625 N. French Dr., Hobbs, NM 88240 Phone:(575) 393-6161 Fax:(575) 393-0720 District II 811 S. First St., Artesia, NM 88210 Phone:(575) 748-1283 Fax:(575) 748-9720 District III 1000 Rio Brazos Rd., Aztec, NM 87410 Phone:(505) 334-6178 Fax:(505) 334-6170 District IV 1220 S. St Francis Dr., Santa Fe, NM 87505 Phone:(505) 476-3470 Fax:(505) 476-3462	State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 S. St Francis Dr. Santa Fe, NM 87505	Form C-103 August 1, 2011 Permit 257743 WELL API NUMBER 30-015-34429 5. Indicate Type of Lease 6. State Oil & Gas Lease No. 7. Lease Name or Unit Agreement Name HOWELL STATE COM																				
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: G		8. Well Number 003																				
2. Name of Operator FASKEN OIL & RANCH LTD		9. OGRID Number 151416																				
3. Address of Operator 6101 Holiday Hill, Road, Midland, TX 79707		10. Pool name or Wildcat																				
4. Well Location Unit Letter <u>N</u> : <u>660</u> feet from the <u>S</u> line and feet <u>1980</u> from the <u>W</u> line Section <u>32</u> Township <u>20S</u> Range <u>25E</u> NMPM _____ County <u>Eddy</u>																						
11. Elevation (Show whether DR, KB, BT, GR, etc.) 3665 GR																						
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit Type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____ Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____																						
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data <table style="width:100%;"> <tr> <td colspan="2" style="text-align: center;">NOTICE OF INTENTION TO:</td> <td colspan="2" style="text-align: center;">SUBSEQUENT REPORT OF:</td> </tr> <tr> <td>PERFORM REMEDIAL WORK <input type="checkbox"/></td> <td>PLUG AND ABANDON <input type="checkbox"/></td> <td>REMEDIAL WORK <input type="checkbox"/></td> <td>ALTER CASING <input type="checkbox"/></td> </tr> <tr> <td>TEMPORARILY ABANDON <input type="checkbox"/></td> <td>CHANGE OF PLANS <input type="checkbox"/></td> <td>COMMENCE DRILLING OPNS. <input type="checkbox"/></td> <td>PLUG AND ABANDON <input type="checkbox"/></td> </tr> <tr> <td>PULL OR ALTER CASING <input type="checkbox"/></td> <td>MULTIPLE COMPL <input type="checkbox"/></td> <td>CASING/CEMENT JOB <input type="checkbox"/></td> <td></td> </tr> <tr> <td colspan="2">Other: _____</td> <td colspan="2">Other: Perforations/Tubing <input checked="" type="checkbox"/></td> </tr> </table>			NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:		PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTER CASING <input type="checkbox"/>	TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE OF PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>		Other: _____		Other: Perforations/Tubing <input checked="" type="checkbox"/>	
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:																				
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTER CASING <input type="checkbox"/>																			
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE OF PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>																			
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>																				
Other: _____		Other: Perforations/Tubing <input checked="" type="checkbox"/>																				
13. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. Plugged well back to the Atoka, and was unsuccessful. Plugged back again to the Wolfcamp and it was successful. Attached is the daily work for both plug backs.																						
Perforations																						
Pool: CEMETARY; MORROW (GAS) , 74640 Location: N -32-20S-25E 660 S 1980 W <table style="width:100%;"> <tr> <th>TOP</th> <th>BOT</th> <th>Open Hole</th> <th>Shots/ft</th> <th>Shot Size</th> <th>Material</th> <th>Stimulation</th> <th>Amount</th> </tr> </table>			TOP	BOT	Open Hole	Shots/ft	Shot Size	Material	Stimulation	Amount												
TOP	BOT	Open Hole	Shots/ft	Shot Size	Material	Stimulation	Amount															
Pool: SEVEN RIVERS HILLS; ATOKA, N , 97272 Location: N -32-20S-25E 660 S 1980 W <table style="width:100%;"> <tr> <th>TOP</th> <th>BOT</th> <th>Open Hole</th> <th>Shots/ft</th> <th>Shot Size</th> <th>Material</th> <th>Stimulation</th> <th>Amount</th> </tr> </table>			TOP	BOT	Open Hole	Shots/ft	Shot Size	Material	Stimulation	Amount												
TOP	BOT	Open Hole	Shots/ft	Shot Size	Material	Stimulation	Amount															
Pool: CEMETARY; WOLFCAMP (GAS) , 74680 Location: N -32-20S-25E 660 S 1980 W <table style="width:100%;"> <tr> <th>TOP</th> <th>BOT</th> <th>Open Hole</th> <th>Shots/ft</th> <th>Shot Size</th> <th>Material</th> <th>Stimulation</th> <th>Amount</th> </tr> <tr> <td>7264</td> <td>7285</td> <td>N</td> <td>21</td> <td>1</td> <td></td> <td>Acid</td> <td>1500</td> </tr> </table>			TOP	BOT	Open Hole	Shots/ft	Shot Size	Material	Stimulation	Amount	7264	7285	N	21	1		Acid	1500				
TOP	BOT	Open Hole	Shots/ft	Shot Size	Material	Stimulation	Amount															
7264	7285	N	21	1		Acid	1500															
Tubing																						
CEMETARY;WOLFCAMP (GAS) , 74680 <table style="width:100%;"> <tr> <th>Tubing Size</th> <th>Type</th> <th>Depth Set</th> <th>Packer Set</th> </tr> <tr> <td>0.25</td> <td>N80</td> <td>7161</td> <td>7150</td> </tr> </table>			Tubing Size	Type	Depth Set	Packer Set	0.25	N80	7161	7150												
Tubing Size	Type	Depth Set	Packer Set																			
0.25	N80	7161	7150																			
I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOC guidelines <input type="checkbox"/> a general permit <input type="checkbox"/> or an (attached) alternative OCD-approved plan <input type="checkbox"/>																						
<table style="width:100%;"> <tr> <td>SIGNATURE</td> <td><u>Electronically Signed</u></td> <td>TITLE</td> <td><u>Marketing Manager</u></td> <td>DATE</td> <td><u>9/26/2018</u></td> </tr> <tr> <td>Type or print name</td> <td><u>Sheila Simmons</u></td> <td>E-mail address</td> <td><u>sheilas@forl.com</u></td> <td>Telephone No.</td> <td><u>432-687-1777</u></td> </tr> </table>			SIGNATURE	<u>Electronically Signed</u>	TITLE	<u>Marketing Manager</u>	DATE	<u>9/26/2018</u>	Type or print name	<u>Sheila Simmons</u>	E-mail address	<u>sheilas@forl.com</u>	Telephone No.	<u>432-687-1777</u>								
SIGNATURE	<u>Electronically Signed</u>	TITLE	<u>Marketing Manager</u>	DATE	<u>9/26/2018</u>																	
Type or print name	<u>Sheila Simmons</u>	E-mail address	<u>sheilas@forl.com</u>	Telephone No.	<u>432-687-1777</u>																	
For State Use Only:																						
APPROVED BY: <u>Raymond Podany</u> TITLE <u>Geologist</u> DATE <u>10/4/2018 8:20:04 AM</u>																						

District I
1625 N. French Dr., Hobbs, NM 88240
Phone:(575) 393-6161 Fax:(575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone:(575) 748-1283 Fax:(575) 748-9720
District III
1000 Rio Brazos Rd., Aztec, NM 87410
Phone:(505) 334-6178 Fax:(505) 334-6170
District IV
1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505

Comments

Permit 257743

TUBING COMMENTS

Operator: FASKEN OIL & RANCH LTD 6101 Holiday Hill Midland, TX 79707	OGRID: 151416
	Permit Number: 257743
	Permit Type: Tubing

Comments

Created By	Comment	Comment Date
------------	---------	--------------

There are no Comments for this Permit