

State of New Mexico
Energy, Minerals and Natural Resources
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO.	
30-015-05303	
5. Indicate Type of Lease	
STATE <input type="checkbox"/> FEE <input type="checkbox"/>	
6. State Oil & Gas Lease No.	
NM-LC-029395-B	

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.)

7. Lease Name or Unit Agreement Name	Turner B
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1. Type of Well: Oil Well ☐ Gas Well ☐ Other ☒ - WIW

Turner B	
8. Well Number	78

2. Name of Operator
LH Operating

9. OGRID Number
329319

3. Address of Operator
4809 Cole Ave, Ste 200 Dallas, TX 75205

10. Pool name or Wildcat
Grayburg Jackson; SR-Q-G-SA

4. Well Location

Unit Letter J : 2080 feet from the S line and 1980 feet from the E line

Section 20 Township 17S Range 31E NMPM EDDY 0

11. Elevation (*Show whether DR, RKB, RT, GR, etc.*)

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK	<input type="checkbox"/>	PLUG AND ABANDON	<input type="checkbox"/>
TEMPORARILY ABANDON	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	MULTIPLE COMPL	<input type="checkbox"/>
DOWNHOLE COMMINGLE	<input type="checkbox"/>		
CLOSED-LOOP SYSTEM	<input type="checkbox"/>		
OTHER:			<input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
COMMENCE DRILLING OPNS.	<input type="checkbox"/>	P AND A	<input type="checkbox"/>
CASING/CEMENT JOB	<input type="checkbox"/>		

OTHER:

OTHER:

M.I.T.

☒

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

07/11/2023 a 30 min M.I.T. was performed on this well and approved by compliance officer Barbara Lydick. Please see attached pressure chart.

Spud Date:

Rig Release Date:

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

SIGNATURE

TITLE

Erasmus

DATE 09/20/23

Type or print name John Denman
For State Use Only

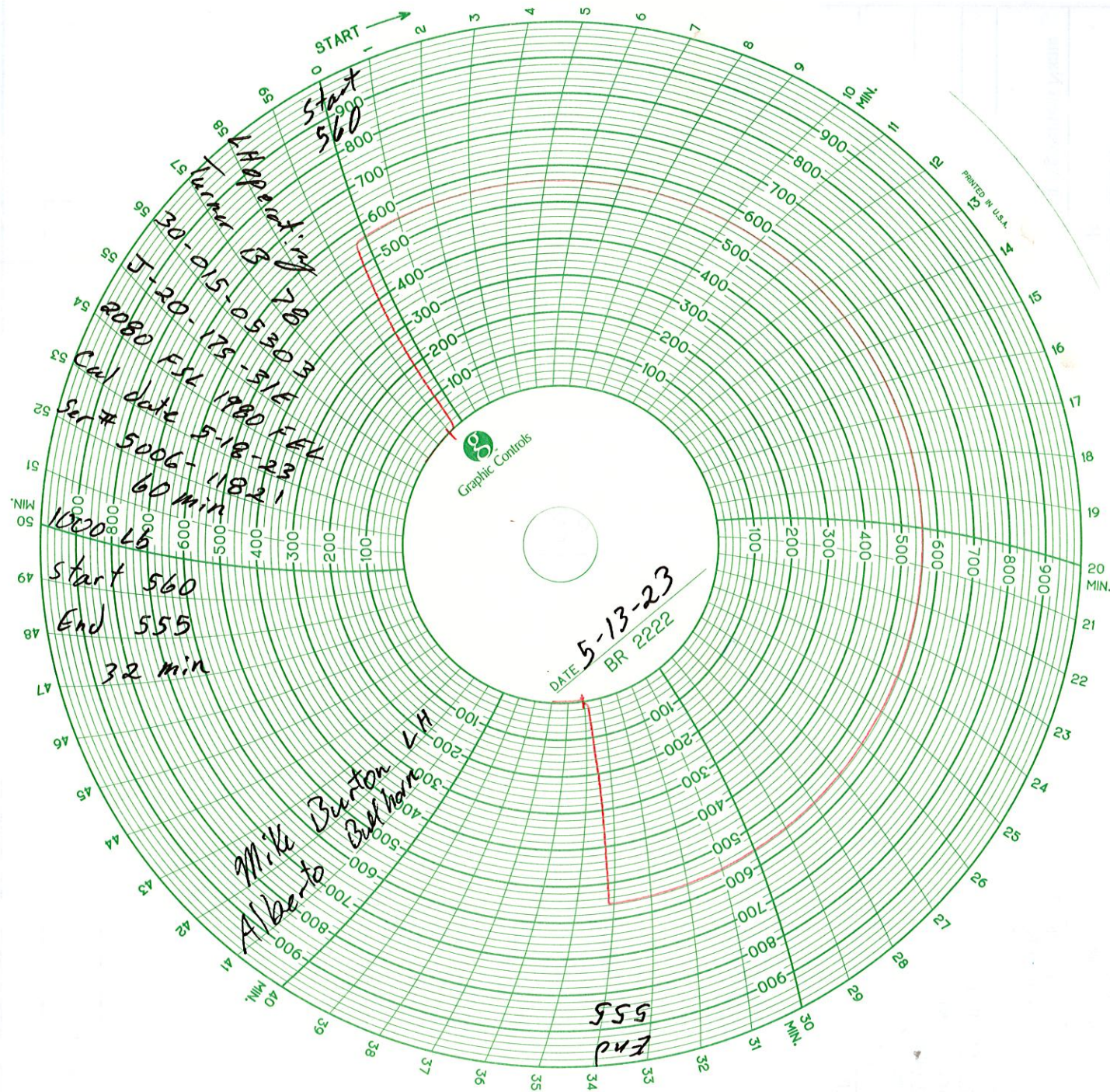
E-mail address: john@lhoperating.com

PHONE: 575-909-0149

APPROVED BY: _____
Conditions of Approval (if any): _____

TITLE

DATE _____



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

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CONDITIONS

Action 267518

CONDITIONS

Operator: LH Operating, LLC 4809 Cole Ave Dallas, TX 75205	OGRID: 329319
	Action Number: 267518
	Action Type: [C-103] Sub. General Sundry (C-103Z)

CONDITIONS

Created By	Condition	Condition Date
gcordero	None	10/3/2023