STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

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

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease: State ☐ Fee ☒
5. State Oil & Gas Lease No.: N/A

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. OIL WELL ☒ GAS WELL ☐ OTHER-
7. Unit Agreement Name: N/A
2. Name of Operator: Fermwalt - Powell
8. Farm or Lease Name: Norman
3. Address of Operator: 1312 Camino Equestre, N.W. Albuquerque, NM 87107
9. Well No.: Two (2)
4. Location of Well: UNIT LETTER L, 921 FEET FROM THE West LINE AND 1650 FEET FROM THE South LINE, SECTION 5 TOWNSHIP 7-N RANGE 8-E NMPM.
10. Field and Pool, or Wildcat: Wildcat
15. Elevation (Show whether DF, RT, GR, etc.): 6298'
12. County: Torrance
16.

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 ☐		COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	CHANGE PLANS ☐	CASING TEST AND CEMENT JOB ☑	
OTHER ☐		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 1103.

Set 191' - 4½" - 10.5# & Cemented To Top.
Perforated - Acidized - Swabbed.
Fresh Water Encountered.
Converted To Water Well.

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

SIGNED Fermwalt - Powell J. L. Powell TITLE Partner DATE 3-14-84

APPROVED BY Roy Ebbs TITLE OIL & GAS INSPECTOR DATE 3-27-84

CONDITIONS OF APPROVAL, IF ANY:

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

Form C-105
Revised 10-1-78

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OIL CONSERVATION DIVISION

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

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5a. Indicate Type of Lease: State ☐ Fee ☒
5. State Oil & Gas Lease No.: N/A

1a. TYPE OF WELL
b. TYPE OF COMPLETION
OIL WELL ☒ GAS WELL ☐ DRY ☐ OTHER
NEW WELL ☐ WORK OVER ☐ DEEPEN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ OTHER

7. Unit Agreement Name: N/A
8. Farm or Lease Name: NORMAN
9. Well No.: TWO (2)
2. Name of Operator: FORMWELT - POWELL
3. Address of Operator: 1312 CAMINO ECUESTRE, NW, Albuquerque, NM 87107
10. Field and Pool, or Wildcat: WILDCAT
4. Location of Well
UNIT LETTER L LOCATED 921 FEET FROM THE WEST LINE AND 1650 FEET FROM THE South LINE OF SEC. 5 TWP. 7-N RGE. 8E NMPM
12. County

15. Date Spudded	16. Date T.D. Reached	17. Date Compl. (Ready to Prod.)	18. Elevations (DF, RKB, RT, GR, etc.)	19. Elev. Cashinghead
7-29-82	7-29-82			

20. Total Depth	21. Plug Back T.D.	22. If Multiple Compl., How Many	23. Intervals Drilled By →	Rotary Tools	Cable Tools
191'				T.D.	

24. Producing Interval(s), of this completion — Top, Bottom, Name

25. Was Directional Survey Made: NO

26. Type Electric and Other Logs Run: GAMMA-NEUTRON

27. Was Well Cored: N/A

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
4 1/2"	10.5	191'	5 7/8	PERMAN STOP GROUND	NONE

29. LINER RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN

30. TUBING RECORD

SIZE	DEPTH SET	PACKER SET

31. Perforation Record (Interval, size and number)
42 holes 1 1/2 - 15 1/2 #1)

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
WESTERN CO. REPORT ATTACHED	

33. PRODUCTION

Date First Production	Production Method (Flowing, gas lift, pumping — Size and type pump)	Well Status (Prod. or Shut-in)

Date of Test	Hours Tested	Choke Size	Prod'n. For Test Period →	Oil — Bbl.	Gas — MCF	Water — Bbl.	Gas — Oil Ratio

Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate →	Oil — Bbl.	Gas — MCF	Water — Bbl.	Oil Gravity — API (Corr.)

34. Disposition of Gas (Sold, used for fuel, vented, etc.)

Test Witnessed By

35. List of Attachments

36. I hereby certify that the information shown on both sides of this form is true and complete to the best of my knowledge and belief.

SIGNED FORMWELT - POWELL TITLE PARTNER DATE 3-14-84

052-1210

The Western Company
of North America
TREATMENT REPORT

Date 8/10/80 Western District Roswell N.M. F. Receipt 527780
Operator Forcast - Powell
Lease A.D. Well No. 2
Field Wildcat Location Sec 5 / T7 / R28E
County Terrace State New Mexico
Stage Number 1 This Zone ☑ This Well ☑

WELL DATA: OG ☐ NG ☑ NO ☐ OO ☐ WD ☐ IW ☐ Misc. ☐ Depth TD/PB 650' Formation UNDESIGNATED
Size Tubing None Tubing Perf. — Type Packer — Set At —
Size Casing 4½" Wt. 10.5 Set From Surface To T.D. Size Liner — Wt. —
Liner Set From — To — Open Hole: Size — From — To —
Casing Perforations: Size .41 Holes Per Foot USE Intervals 110-114; 132-136, 110-114; 145-148, 152-157
42 Holes
Previous Treatment N/A Prior Production N/A

TREATMENT DATA: Pad Used: Yes ☐ No ☒ Pad Type NONE
Treating Fluid Type: Oil ☐ Water ☐ Acid ☑ Misc. ☐ Foam ☐ Emulsion ☐
Treating Fluid Volume Gals. 1000 Fluid Description 15% DS-30

Total Prop Quantity — Lbs. Prop Type: Sand ☐ Beads ☐ Special ☐ None ☒
Prop Mesh Sizes, Types and Quantities NONE
Hole Loaded With DRY Treat Via: Tubing ☐ Casing ☒ Anul ☐ Tubing & Anul. ☐
Ball Sealers: 24 In 9; 1 Stages of 9, 3
Types and Number of Pumps Used 1 HHP ACIDMASTER
Auxiliary Materials 1gal I-5, 1 gal Clayfixer 3; 22½# KCl

Procedure TREAT VIA CASING 24 BBLS 15% HCL W/ 81 BALLS
Flush.

FLUID PUMPED AND CAPACITIES IN BBLS.

Tubing Cap.	—
Casing Cap.	2.7
Annular Cap.	—
Open Hole Cap.	—
Fluid to Load	—
Pad Volume	—
Treating Fluid	24
Flush	3
Overflush	—
Total to Recover	27

Time AM/PM	Treating Pressure-Psi Tubing	Casing	Barrels Fluid Pumped	Inj. Rate B P M	REMARKS— TEST LINES SAFETY MTG
11:13	—	0	0	2	START ACID
11:15	—	400	2	2	ACID ON FMT
11:15	—	400	3	4	FMT BREAK
11:17	—	600	4	4	START 9 BALLS EVERY 2 BBLS
11:18	—	600	7	4	BALLS ON FMT.
11:21	—	1800	24	3.8	START FLUSH
11:22	—	1800	27	3.8	FLUSH ON FMT - SHUTDOWN
					ISDP - 50
					5 MIN - 0

Treating Pressure: Min. 400 Max. 2000 Avg. 1000
Inj. Rate on Treating Fluid 3.5 Rate on Flush 3.2
Avg. Inj. Rate 3.5 I.S.D.P. 50 Flush Dens. lb/gal 8.3
Final Shut-in Pressure 0 in 5 Minutes.
Operator's Maximum Pressure 3000

Customer Representative J.C. Powell
Western Representative Rick Walla
Distribution

Job Number 608017