

Submit 3 Copies
to: **Assistant
District Office**

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Box 100, Lordsburg, NM 88050

DISTRICT III
1000 Main Street, Alamogordo, NM 88001

Oil Conservation Division
P.O. Box 2068
Santa Fe, New Mexico 87504-2068

WELL API NO.

5. Indicate Type of Lease

STATE ☒ FEDERAL ☐

6. State Oil & Gas Lease No.

1. 6331

7. Lease Name or Unit Agreement Name

O'Connell Ranch (Enhanced
Recovery) Unit

8. Well No.

ORU # 8

9. Pool name or Wildcat

Wildcat, Chinle

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. Type of Well:

OIL

WELL ☒

GAS

WELL ☐

OTHER ☐

2. Name of Operator

Energap Corporation

3. Address of Operator

16945 Northchase Dr., Ste. 1700 Houston, TX 77060

4. Well Location

Unit Label A : 515 Feet From The N Line and 669 Feet From The E Line

Section 15

Township 11 N

Range 25 E

NMPM Guadalupe

County

10. Elevation (Show whether OF, RKB, RT, GR, etc.)

4577.4' GR

11. 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 OPNS. ☐

PLUG AND ABANDONMENT ☐

PULL OR ALTER CASING ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

OTHER: ☐

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, including estimated date of starting and completion work) SEE RULE 1103.

Run open ended tubing to 492'. Equilibrate 15.5 # cement to a minimum depth of 255'.
Pull tubing. Fill remainder of hole with water. Set 20' surface plug. Set dry
hole marker.

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

SIGNATURE

Ramon Elias

VICE P. OF Operations

DATE 6-8-92

TYPE OR PRINT NAME

Ramon Elias

(713)

TELEPHONE NO. 876-0170

(This space for Stamp Use)

APPROVED BY

Ry Elham

DISTRICT SUPERVISOR

DATE

6-12-92

CONDITIONS OF APPROVAL, IF ANY: