

District I - (575) 393-6161

Energy, Minerals and Natural Resources

Revised July 18, 2013

1625 N. French Dr., Hobbs, NM 88249

District II - (575) 748-1285

811 S. First St., Artesia, NM 88210

District III - (505) 334-6178

1000 Rio Brazos Rd., Aztec, NM 87410

District IV - (505) 476-3460

1220 S. St. Francis Dr., Santa Fe, NM 87505

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

NM OIL CONSERVATION

APR 04 2015

RECEIVED

WELL API NO.

30-015-25015

5. Indicate Type of Lease

STATE  FEE

6. State Oil & Gas Lease No.

002258

7. Lease Name or Unit Agreement Name

TWO FORKS STATE

8. Well Number 002

9. OGRID Number 119305

10. Pool name or Wildcat

SWD; WOLFCAMP-PENN-MISS-DEVONIAN

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: Oil Well  Gas Well  Other: SWD

2. Name of Operator

RAY WESTALL OPERATING, INC.

3. Address of Operator

P.O. BOX 4, LOCO HILLS, NM 88255

4. Well Location

Unit Letter 1 : 1660' feet from the SOUTH line and 660' feet from the EAST line.

Section 2 Township 18S Range 28E NMPM County EDDY

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  PLUG AND ABANDON 
TEMPORARILY ABANDON  CHANGE PLANS 
PULL OR ALTER CASING  MULTIPLE COMPL 
DOWNHOLE COMMINGLE 
CLOSED-LOOP SYSTEM

SUBSEQUENT REPORT OF:

- REMEDIAL WORK  ALTERING CASING 
COMMENCE DRILLING OPNS.  P AND A 
CASING/CEMENT JOB

OTHER:

OTHER:

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.

03/29/16 - Changed out 3 joints of 2 7/8" tubing, ran chart per Richard Inge. Chart attached.

Spud Date:

[Empty box for Spud Date]

Rig Release Date:

[Empty box for Rig Release Date]

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

SIGNATURE

[Handwritten Signature]

TITLE BOOKKEEPER

DATE 3/31/16

Type or print name RENE HOPE

E-mail address:

PHONE: 575-677-2370

For State Use Only

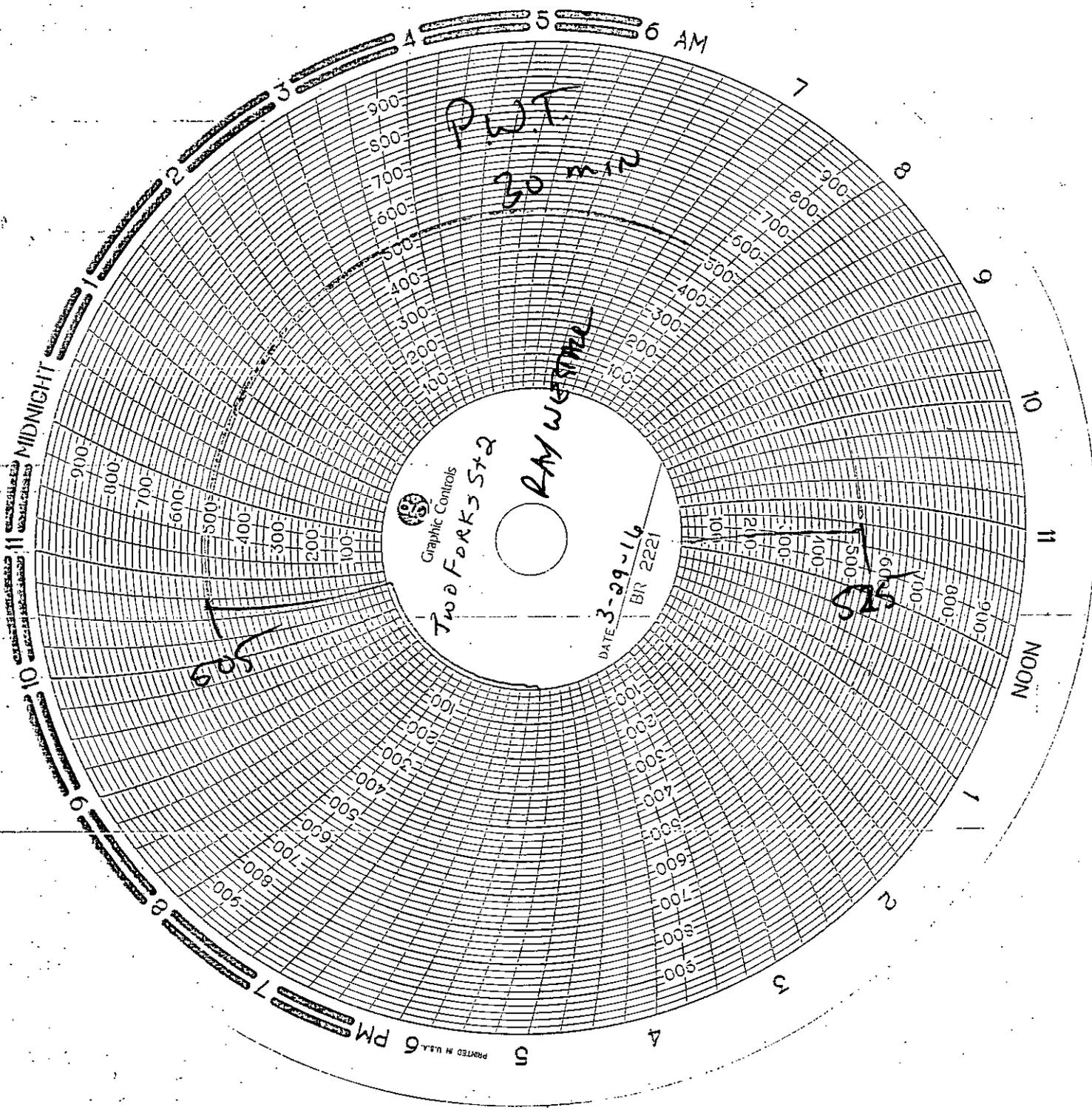
APPROVED BY:

[Handwritten Signature]

TITLE COMPLIANCE OFFICER

DATE 4/7/16

Conditions of Approval (if any):



PWT  
30 min

RAM WESTRAL

Graphic Controls  
Two Forks 5x2

DATE 3-29-16  
BR 2221

575

12:00  
11:00  
10:00  
9:00  
8:00  
7:00  
6:00  
5:00  
4:00  
3:00  
2:00  
1:00  
MIDNIGHT

NOON

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