

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. <b>30-015-03835</b>
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: <b>West Henshaw Premier Unit</b>
8. Well No. <b>2</b>
9. OGRID Number
10. Pool name or Wildcat <b>Henshaw West (Grayburg)</b>

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

Pit or Below-grade Tank Application ☐ or Closure ☐

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 \_\_\_\_\_

**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 **Injection**

2. Name of Operator  
**Nordstrand Engineering Inc.**

3. Address of Operator  
**3229D'Amico St. #2200, Houston, TX 77019 (713)520-1555**

4. Well Location  
Unit Letter **K** : **3329** feet from the **Noth** line and **1980** feet from the **West** line  
Section **3** Township **16S** Range **30E** NMPM County **Eddy**

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

Pit or Below-grade Tank Application ☐ or Closure ☐

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input 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.

Request approval to P&A existing perfs. @ 2819-2827.

8 5/8 @ 433 w/330 sx. circ.

5 1/2 @ 2860 w/600 sx. circ. (calculated)

1. MIRU BCM plugging company.
2. POH w/ rods and tbq. ?
3. Set 5 1/2 CIBP @ 2775 and cap with 3 sx. cement. Circulate hole with mud laden fluid.
4. Perf. 5 1/2 csg. @ 2200'. RIH set packer @ 2000'. Sqz. 50 sx. cement. WOC & Tag.
5. Perf. 5 1/2 csg. @ 1492'. Set packer @ 1300, Sqz. 50 sx. cement. WOC & tag.
6. Perf. 5 1/2 csg. @ 600'. Set Packer @ 400, Sqz. 50 sx cmt. WOC & Tag.
7. Spot 10 sx. surface plug. Cut off wellhead and weld on Dry Hole Marker.

**Notify OCD 24 hrs. prior  
To any work done.**

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 ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Roger D. Brooks TITLE Agent DATE 7/31/07

Type or print name Roger Brooks

E-mail address:

Telephone No. 432-580-7161

For State Use Only

APPROVED BY [Signature] TITLE C.O. DATE 8/6/07

Conditions of Approval (if any):