

Submit 3 Copies To Appropriate District Office
District I
1625 N French Dr., Hobbs, NM 88240
District II
1301 W Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S St Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

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

WELL API NO. <u>27929</u> <u>30-015-31808</u>
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 CEDAR 32 STATE COM
8. Well Number 1
9. OGRID Number 258462
10. Pool name or Wildcat CEDAR LAKE MORROW

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 ☐

2. Name of Operator
NADEL AND GUSSMAN HEYCO, LLC **OCT 09 2008**

3. Address of Operator
PO BOX 1936
ROSWELL NM 88202 **OCD-ARTESIA**

4. Well Location
Unit Letter H : 1980' feet from the NORTH line and 660' feet from the EAST line
Section 32 Township 17S Range 31E NMPM County EDDY

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3,726' GL

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 checked="" type="checkbox"/>	PLUG AND ABANDON <input 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 COMPL <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.

NADEL AND GUSSMAN HEYCO LLC PLANS TO RE-PERF THE EXISTING MORROW PAY WITH 3-1/8" CASING GUNS LOADED 3 SPF AT 60-120 DEG PHASING AS FOLLOWS
MORROW 11680-92' (39)
FRAC MORROW 11680-92' DOWN TUBING AT 10-15 BPM USING CO2 FOAM CARRYING 10,000 LBS 30/60 SINTER LITE
IF DECISION IS MADE TO ABANDON CURRENT MORROW PERFS 11680-92', WE WILL SET A CEMENT RETAINER AT APPROX 11,620' AND SQUEEZE WITH 50 SX CLASS "H" WITH FLUID LOSS CONTROL FOLLOWED BY 50 SX CLASS "H" NEAT WOC CLEAN WELL OUT TO ORIGINAL PBD OF APPROXIMATELY 11850' PERF LOWER MORROW WITH 3-3/8" OR 4" CASING GUNS LOADED 3 SPF AT 60-120 DEG PHASING
L MORROW 11762-78'
ACIDIZE WITH 750 GALS NE FE 7 5% HCL MORROW ACID
IF DECISION MADE TO FRAC, L MORROW 11762-78' WILL BE FRAC'ED DOWN TUBING AT 10-15 BPM USING 600 CO2 FOAM AND APPROX 10 000 LBS 18/40 VERSAPROP
IF DECISION IS MADE TO ABANDON LOWER MORROW 11762-78' SET CIBP IN 11670-11675' PERFS THE UPPER MORROW WITH 1-11/16" THROUGH TBG GUNS LOADED 6 SPF AT 0 DEG PHASING
U MORROW 11662-64' (18)
ACIDIZE WITH 250 GALS NEFE 7 5% HCL MORROW ACID

ACCEPTED FOR RECORD

OCT 14 2008

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I certify that any pit or below-grade tank has been/will be constructed or closed according to NMOC guidelines ☐ a general permit ☐ or (attached) alternative OGD approved plan ☒.

SIGNATURE Jessette Serrano TITLE ENG TECH DATE 2/28/08

Type or print name _____ F-mail address: jserrano@heycoenergy.com Telephone No. 505 623 6601
For State Use Only

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