

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

|                        |  |
|------------------------|--|
| NO. OF COPIES RECEIVED |  |
| DISTRIBUTION           |  |
| SANTA FE               |  |
| FILE                   |  |
| U.S.G.S.               |  |
| LAND OFFICE            |  |
| OPERATOR               |  |

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

SEP 21 1982

O. C. D.

ARTESIA, OFFICE

Form C-103  
Revised 10-1-78

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.)

|                                                                                                                                                                                                        |  |                                                                                                      |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------|
| OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>                                                                                          |  | 5a. Indicate Type of Lease<br>State <input type="checkbox"/> Fee <input checked="" type="checkbox"/> |
| 1. Name of Operator<br>STEVENS OPERATING CORPORATION                                                                                                                                                   |  | 5. State Oil & Gas Lease No.                                                                         |
| 2. Address of Operator<br>P. O. Box 2408, Roswell, New Mexico 88201                                                                                                                                    |  | 7. Unit Agreement Name                                                                               |
| 3. Location of Well<br>UNIT LETTER <u>F</u> <u>2310</u> FEET FROM THE <u>North</u> LINE AND <u>1650</u> FEET FROM<br>THE <u>West</u> LINE, SECTION <u>31</u> TOWNSHIP <u>8S</u> RANGE <u>29E</u> NMPM. |  | 8. Farm or Lease Name<br>O'Brien "I"                                                                 |
|                                                                                                                                                                                                        |  | 9. Well No.<br>5                                                                                     |
|                                                                                                                                                                                                        |  | 10. Field and Pool, or Wildcat<br>Twin Lakes-San Andres Assoc.                                       |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br>3985.6 GR., 3991.6 K.B.                                                                                                                               |  | 12. County<br>Chaves                                                                                 |

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

|                                                |                                                                              |
|------------------------------------------------|------------------------------------------------------------------------------|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/>                                    |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>                                        |
| PULL OR ALTER CASING <input type="checkbox"/>  | OTHER <u>Perforation &amp; Treatment</u> <input checked="" type="checkbox"/> |

SUBSEQUENT REPORT OF:

|                                                      |                                               |
|------------------------------------------------------|-----------------------------------------------|
| REMEDIAL WORK <input type="checkbox"/>               | ALTERING CASING <input type="checkbox"/>      |
| COMMENCE DRILLING OPNS. <input type="checkbox"/>     | PLUG AND ABANDONMENT <input type="checkbox"/> |
| CASING TEST AND CEMENT JOBS <input type="checkbox"/> | OTHER <input type="checkbox"/>                |

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 1703.

Propose to add perforations at 2684, 84.5, 2686, 86.5, 87, 2695, 95.5, 96, 96.5, 2723, 23.5, 24, 24.5, 25 and acidize interval.

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

SIGNED [Signature] TITLE Production Coordinator DATE Sept. 20, 1982

Original Signed By  
Leslie A. Clements  
Supervisor District II

APPROVED BY [Signature] TITLE Supervisor District II DATE SEP 24 1982

CONDITIONS OF APPROVAL, IF ANY: