

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501Form C-103
Revised 10-1-79

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SANTA FE	✓
FILE	✓
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.

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.)

RECEIVED

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Ralph Nix ✓	8. Farm or Lease Name Elizabeth
3. Address of Operator P.O. Box 617, Artesia, New Mexico 88210	9. Well No. #2
4. Location of Well UNIT LETTER <u>E</u> <u>1650</u> FEET FROM THE <u>North</u> LINE AND <u>330</u> FEET FROM THE <u>West</u> LINE, SECTION <u>7</u> TOWNSHIP <u>8-S</u> RANGE <u>29-E</u> NMPM.	10. Field and Pool, or Wildcat Bull's Eye-SA
15. Elevation (Show whether DF, RT, GR, etc.) 4090' GL	12. County Chaves

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER ☐ALTERING CASING ☐
PLUG AND ABANDONMENT ☐Perforating & Treatment ☒

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 1103.

- 5/30/80 - Rigged up well service unit. Ran perforating gun & perforated 9 shots at the following intervals: 2666', 68', 69', 70', 71', 72', 84', 85', 86'
- 5/31/80 - Ran packer on tubing, set at 2641'. Treated with 3,000 gallons of 20% NEFE acid with additives, using 12 ball sealers. Started flowing to tank.
- 6/4/80 Ran 2674' of 2 3/8", 4.7#, EUE tubing. Ran rods & pump. Hung on pump jack. Set to pumping.

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

SIGNED [Signature] TITLE Operations Manager DATE 7/7/80APPROVED BY [Signature] TITLE OIL AND GAS INSPECTOR DATE JUL 8 1980

CONDITIONS OF APPROVAL, IF ANY: