

OIL CONSERVATION DIVISION

P. O. BOX 2086
SANTA FE, NEW MEXICO 87501

Form O.C.D. 100
Revised 12-1-82

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RECEIVED

APR 11 1983

1a. Indicate Type of Lease	State ☐	Fee ☒
1b. 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 WELLS TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT TO DRILL" (FORM C-101) FOR SUCH PROPOSALS.

O.C.D.
ARTESIA, OFFICE

1. Name of Operator Cibola Energy Corporation ✓	2. Unit Agreement Name
3. Address of Operator P.O. Box 1668, Albuquerque, New Mexico 87103	4. Farm or Lease Name J. P. White
4. Location of Well UNIT LETTER <u>A</u> <u>330</u> FEET FROM THE <u>North</u> LINE AND <u>990</u> FEET FROM THE <u>East</u> LINE. SECTION <u>18</u> TOWNSHIP <u>10S</u> RANGE <u>28E</u> NEQU.	5. Well No. 4
15. Elevation (Show whether DF, RT, GR, etc.) 3791.5	10. Field and Pool, or Wellbore Race Track San Andres
	12. County Chaves

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☒	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOB ☐	

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.

2-17-83 Hit TD at 2320'.

We propose to plug this well as follows:

- 1st plug, 35 sacks Class C Cement to cover top San Andres, 1680-1580'.
- 2nd plug, 35 sacks Class C Cement to cover top of Yates, 505-405'.
- 3rd plug, 35 sacks Class C Cement to cover ⁵⁴⁰⁵ top of surface casing, 370-270'.
- 4th plug 10 sacks set dry hole marker.

Location will be cleaned off junk and leveled for inspection.

Revised

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

SIGNED Leslie A. Clements TITLE Drilling Secretary DATE 4-8-83

APPROVED BY _____ TITLE Original Signed By Leslie A. Clements Supervisor District II DATE APR 19 1983

CONDITIONS OF APPROVAL, IF ANY: