

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

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DISTRIBUTION	
SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.S.	
LAND OFFICE	
OPERATOR	<input checked="" type="checkbox"/>

5a. Indicate Type of Lease  
State ☐ For ☒  
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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Rhymes Drlg. Co., Inc. ✓	8. Farm or Lease Name O'Brien-Deming "6"
3. Address of Operator P.O. Box 729, Roswell, NM 88201	9. Well No. #2
4. Location of Well UNIT LETTER K 1650 FEET FROM THE South LINE AND 1650 FEET FROM West THE West LINE, SECTION 6 TOWNSHIP 8 South RANGE 29 East NMPM.	10. Field and Pool, or Wildcat Bullseye-San Andres
15. Elevation (Show whether DF, RT, GR, etc.) 4026.3 GR	12. County Chaves

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 type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <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 1103.

6/26/83 Pull Rods & Tubing  
Frac w/ 1000 Gal. 15% NEFE  
10,000# 100 Mesh Sand  
100,000# 20/40 Sand  
7,000# 10/20 Sand  
70,000 Gal. 2% Gelled KCL

6/27/83 Flow Well Back  
Put on Pump

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 Operations Manager DATE 6/27/83  
Original Signed By  
Leslie A. Clements  
APPROVED BY \_\_\_\_\_ TITLE Supervisor District II DATE JUN 29 1983

CONDITIONS OF APPROVAL, IF ANY: