

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

WELL API NO. 30-005-62192
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name O'Brien P
8. Well No. 1
9. Pool name or Wildcat Red Lake
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3934 KB

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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> Injection	
2. Name of Operator Avra Oil Company	
3. Address of Operator P. O. Box 3193 Midland, TX 79702	
4. Well Location Unit Letter C : 660 Feet From The north Line and 1980 Feet From The west Line Section 28 Township 8S Range 29E NMPM Chaves County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3934 KB	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: converted to an injection well ☒

12. 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.

5-23-95 Pulled & laid pump, rods & tubing. TIH w/AD-1 packer & 91 jts of plastic coated tbg. Packer @ 2832'. Cir backside w/packer fluied & 2% KCL. Set packer w/22000# Altered Commission of our intention to run casing integrity test. Ran test 6-2-95 Pressured up casing to 500 PSI. TP=0. Held pressure for 30 minutes. Held ok. Commenced injecting saltwater 6-5-95. Well on vacuum.

RECEIVED

JUN 16 1995

OIL CON. DIV.
DIST. 2

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

SIGNATURE Sandra Spratt TITLE Agent DATE 6-15-95
TYPE OR PRINT NAME Sandra Spratt TELEPHONE NO. 915-682-4866

(This space for State Use)

ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR

JUN 19 1995

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: