

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

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 Injection <input checked="" type="checkbox"/>	
2. Name of Operator Avra Oil Company	
3. Address of Operator P. O. Box 3193 Midland, TX 79702	
4. Well Location Unit Letter <u>C</u> : <u>660</u> Feet From The <u>north</u> Line and <u>1980</u> Feet From The <u>west</u> Line Section <u>28</u> Township <u>8S</u> Range <u>29E</u> 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:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input 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"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <u>converted to an injection well</u> <input checked="" type="checkbox"/>	

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed operations)

RECEIVED

5-23-95

JUN 20 1995

OIL CON. DIV.
DIST. 2

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/2200. Alerted 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.

Enclosed are copies of the original chart that goes w/this form. The original forms were already sent.

Sandy

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)

APPROVED BY Jim W. Blum TITLE District Supervisor DATE 6/23/95

CONDITIONS OF APPROVAL, IF ANY: