

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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AUG 19 1985

O. C. D.
ARTESIA, OFFICE

5a. Indicate Type of Lease
State ☐ Fee ☒

3. 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 ☒ GAS WELL ☐ OTHER-	7. Unit Agreement Name
2. Name of Operator Pelto Oil Company	8. Farm or Lease Name O'Brien L
3. Address of Operator One Allen Center, Suite 1800, 500 Dallas, Houston, TX 77002	9. Well No. 15
4. Location of Well UNIT LETTER B 950 FEET FROM THE North LINE AND 1675 FEET FROM THE East LINE, SECTION 6 TOWNSHIP 9S RANGE 29E NMPM.	10. Field and Pool, or Wildcat Twin Lakes-San Andres Assoc.
15. Elevation (Show whether DF, RT, GR, etc.) 3975 GR	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 JOBS ☐	

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 1703.

Production before remedial work: 2 BOPD, 4 BWPD, 8 MCFD.

3-14-85: Perforate additional San Andres holes w/4" casing gun using SSB-2 charges @ 2725, 26, 28, 29, 32, 36, 37, 41, 42, 44, 46, 47, 48, 49, 50, 51, 52, 53, 54, 63, 64, 65, 66 67'.

3-19-85: Acidize w/4000 gal. 20% NEFE.

5-16-85: Acid frac perfs 2725-2807' w/6000 gal. 20% NEFE.

Production after remedial work: 7 BOPD, 11 BWPD, 30 MCFD

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

SIGNED Bernie Malson Bernie Malson TITLE Prod Manager Administration DATE 8-15-85

APPROVED BY _____ TITLE Original Signed By
Les A. Clements DATE _____
Supervisor District II

CONDITIONS OF APPROVAL, IF ANY: