

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

Form C-103
Revised 10-1-78

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P. O. BOX
SANTA FE, NEW MEXICO 87501

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O. C. D.
ARTESIA OFFICE

5a. Indicate Type of Lease State ☐ Free ☒
5. State Oil & Gas Lease No. N/A
7. Unit Agreement Name N/A
8. Farm or Lease Name O'Brien "R"
9. Well No. 3
10. Field and Pool, or Wildcat Red Lake Ridge San Andres
12. County Chaves

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.

OIL ☒ GAS ☐ OTHER ☐

WELL

Name of Operator
Stevens Operating Corporation

Address of Operator
P. O. Box 2203 Roswell, New Mexico 88201

Location of Well
UNIT LETTER B 660 FEET FROM THE North LINE AND 1980 FEET FROM
THE East LINE, SECTION 28 TOWNSHIP 8-S RANGE 29-E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)

3951 GR

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

PERFORM REMEDIAL WORK ☐

TEMPORARILY ABANDON ☐

PULL OR ALTER CASING ☐

OTHER ☐

PLUG AND ABANDON ☐

CHANGE PLANS ☐

REMEDIAL WORK ☐

COMMENCE DRILLING OPS. ☒

CASING TEST AND CEMENT JOBS ☒

OTHER ☐

ALTERING CASING ☐

PLUG AND ABANDONMENT ☒

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1503.

1-16-85

Move in Desert Rig #1 & Spud @ 6:00 PM, 1-16-85. PTD 380'.
Ran 9 jts 8 5/8 x 24# tbg set & cmnt @ 380' w/225 sxs Class
"C" cmnt w/2% CaCl₂, circ 50 sxs. WOC 18 hrs. Pressure up
1000# for 30 minutes logging no pressure decrease.

1-22-85

PTD 3002', TD @ 4:15 PM, 1-22-85.

1-23-85

Set 100' plug from 2918' to 2818' (40 sxs)
Set 100' plug from 2280' to 2180' (40 sxs)
Set 100' plug from 1786' to 1686' (40 sxs)
Set 100' plug from 1253' to 1153' (80 sxs)
Set 100' plug from 441' to 341' (90 sxs), & Tagged.

1-29-85

Rig up Dowell & pump 3 sxs Class "A" cmnt 2/2% CaCl₂, set
60' Surface Plug.

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

SIGNED [Signature] TITLE Production Controller DATE 1-31-85

APPROVED BY _____ TITLE _____ DATE _____

Post ID-2
2-8-85
P+H