

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" for such proposals.)

Artesia, NM

RECEIVED

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

CIBOLA ENERGY CORPORATION ✓

3. ADDRESS OF OPERATOR

P. O. Box 1668, Albuquerque, NM 87103

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)

At surface

330 FSW; 990 FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, CR, etc.)

KB 3889.6

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

DUNCAN FEDERAL

9. WELL NO.

#2

10. FIELD AND POOL, OR WILDCAT

Wildcat SA

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec. 7 T9S R28E

12. COUNTY OR PARISH

Chaves

13. STATE

NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐PULL OR ALTER CASING ☐FRACTURE TREAT ☐MULTIPLE COMPLETION ☐SHOOT OR ACIDIZE ☐ABANDON* ☐REPAIR WELL ☐CHANGE PLANT ☐(Other) ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐REPAIRING WELL ☐FRACTURE TREATMENT ☐ALTERING CASING ☐SHOOTING OR ACIDIZING ☐ABANDONMENT* ☐(Other) ☐

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Re: 1/6/89 Notice of NonCompliance
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Paul Briggs, field supervisor, called Betty McBride 1/11/89 at 3:30 P.M. with the following information:

The drain and/or circulating valve on back of tank was sealed pursuant to regulation.

I hereby certify that the foregoing is true and correct:

SIGNED Betty McBrideTITLE Drilling SecretaryDATE 1/17/89

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY: _____

TITLE _____

ACCEPTED FOR RECORD
PIER W. CHESTER
DATE _____

MAR 7 1989

*See Instructions on Reverse Side