

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

RECEIVED

SEP 12 1979

Form O-103
Revised 10-1-78

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U.S.G.S.	
LAND OFFICE	
OPERATOR	1

O. C. C.

ARTESIA, OFFICE

5a. Indicate Type of Lease	State ☒ Fee ☐
5. State Oil & Gas Lease No.	E 9359

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO REPERFORATE OR PLUG BACK TO A DIFFERENT RESERVOIR. USE APPLICATION FOR PERMIT TO DRILL (FORM O-101) FOR SUCH PROPOSALS.)

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐	7. Unit Agreement Name Atlantic State
2. Name of Operator H & W Enterprises ✓	8. Farm or Lease Name Atlantic State
3. Address of Operator P.O. Box 437 Artesia, NM 88210	9. Well No. # 3
4. Location of Well UNIT LETTER 0 330 FEET FROM THE South LINE AND 2310 FEET FROM THE East LINE, SECTION 16 TOWNSHIP 17S RANGE 28E NMPM.	10. Field and Pool, or Wildcat Und. S. Red Lake 7 Rivers
15. Elevation (Show whether DF, RT, GR, etc.) GR	12. County Cady

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 ☐	
OTHER Run Liner			

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 1103.

Discovered casing parted at 645' 140' of pipe fell from 645 to 822.
Plan to run 4 1/2 J5-40 Hydrul Liner. Set top of liner at 620' cement with 35 sx Class C cement w/ 5 lb. salt. Using Halliburton tools and cementing through 3 1/2" tubing.

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

SIGNED Dean Wilson TITLE Co-Owner DATE 9-11-79

APPROVED BY W. A. Gressitt TITLE SUPERVISOR, DISTRICT II DATE SEP 13 1979

CONDITIONS OF APPROVAL, IF ANY:

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