

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

2040 Pacheco St.  
Santa Fe, NM 87505

WELL API NO.  
30-015-87054 04792

Indicate Type of Lease  
STATE ☐ FEE ☒

State Oil & Gas Lease No.  
E6418

Lease Name or Unit Agreement Name  
North East Square Lake Premier Unit

Well No.  
6

Pool name or Wildcat  
NE Square Lake GB-SA North

Well Location  
Unit Letter W : 560 Feet From The S Line and 1980 Feet From The E Line  
3 Section 16S Township 31E Range NMPM Eddy County

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

**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.)

Type of Well:  
OIL WELL ☒ GAS WELL ☐ OTHER ☐

Name of Operator  
AGHORN OPERATING, INC.

Address of Operator  
P. O. Box 12663 Odessa, TX 79768

Well Location  
Unit Letter W : 560 Feet From The S Line and 1980 Feet From The E Line  
3 Section 16S Township 31E Range NMPM Eddy County

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

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Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

### NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐  
OTHER: Return to Production. ☒

### SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ANBANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: ☐

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.

1. RU Pulling Unit
2. RIH w. MA, TAC, tubing, pump, & rods.
- 3 Turn well on to Tank Battery.
- 4 Rig down PU & clean Loc.

After well has been returned to  
production. send a subsequent  
C-103 with a well test.

Notify OCD 24 hrs. prior to any work done

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

SIGNATURE Frosty Gilliam Jr. TITLE President DATE 02-07-02  
TYPE OR PRINT NAME Frosty Gilliam Jr. TELEPHONE NO. 915-550-0804

(This space for State Use)

APPROVED BY [Signature] TITLE Field Rep ID DATE FEB 8 2002  
CONDITIONS OF APPROVAL, IF ANY: