

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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 TO DRILL" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL ☒ GAS WELL ☐ OTHER ☐

FEB 27 1981

Name of Operator

READ & STEVENS, INC.

Address of Operator

P.O. Box 1518, Roswell, New Mexico 88201

Location of Well

UNIT LETTER D 660 FEET FROM THE North LINE AND 660 FEET FROM
West LINE, SECTION 24 TOWNSHIP 16S RANGE 31E N.M.P.M.

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

4486.5' GR

5a. Indicate Type of Lease

State ☒

Fee ☐

5. State Oil & Gas Lease No.

E-4199

7. Unit Agreement Name

8. Form or Lease Name

Gulf West Mesa

9. Well No.

2

10. Field and Pool, or Wildcat

Bunker Hill Penrose

12. County

Eddy

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

FORM REMEDIAL WORK ☐

TEMPORARILY ABANDON ☐

OR ALTER CASING ☐

OTHER ☐

PLUG AND ABANDON ☐

CHANGE PLANS ☐

☐

☐

☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

COMMENCE DRILLING OPNS. ☐

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 1105.

Drilled 7 7/8" hole to TD @ 4242', 2/19/81. 2/20/81, ran 103 jts., 4243' total, 4 1/2", 10.5#/ft. J-55 ST&C casing, set at 4242'. Cmt w/225 sx. HLC w/5# Gilsonite, .3% Halad-4 and 6# salt, followed by 550 sx. Class "C" w/.3% Halad-4, .4% CFR-2 and 6# salt, plug down 1:00 P.M., 2/20/81. Bumped plug to 2000 PSI, held okay.

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

BY Ernie Stubbs

TITLE Drlg. & Prod. Engr.

DATE 2/25/81

APPROVED BY M. K. Williams

TITLE OIL AND GAS INSPECTOR

DATE MAR 02 1981

ADDITIONS OF APPROVAL, IF ANY: