

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

P.O. Box 2088 RECEIVED
Santa Fe, New Mexico 87504-2088

JUN 18 1991

O. C. D.
ARTESIA, OFFICE

WELL APT NO.

30-015-23861

5. Indicate Type of Lease

STATE ☐

FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Red Lake Unit

8. Well No.

25

9. Pool name or Wildcat

Red Lake, East

1. Type of Well:

OIL
WELL ☐

GAS
WELL ☐

OTHER

Injection Well

2. Name of Operator

Beach Exploration, Inc.

3. Address of Operator

800 N. Marienfeld Ste. 200 Midland, Texas 79701

4. Well Location

Unit Letter J : 2310 Feet From The North Line and 2310 Feet From The East Line

Section 36

Township 16S

Range 28E

NMPM

Eddy

County

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

11. 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: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

Packer Leakage Test ☐

12. 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.

5-14-91 Ran 54 jts. of 2 3/8" tbg. and 5 1/2" Model AD-1 Tension packer, Set pkr. @ 1697.00'. Pumped 22 bbls fresh water @ 21 1/2 BPM @ 0# Pressure, pumped 11 bbls packer fluid. Well bore pressure to 300#, finished pumping 7 bbls packer fluid, set packer. Could not get a good test. Left backside full, will test 5-15-91.

5-15-91 RU hot oil service on 4 1/2" casing, pressured up to 700#, bleed off to 500# in 4 minutes. Casing seems to have small leak, OCD will monitor well every month. Witnessed by Johnny Robinson.

Post ID-3

7-12-91

chg prod to water

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

SIGNATURE

Production

6-14-91

TITLE

DATE

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT III

APPROVED BY

TITLE

DATE

JUL 09 1991

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

JUN 18 1991

O. C. D.
ARTESIA, OFFICE

