

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 30660

Indicate Type of Lease  
STATE ☐ FEE ☒

State Oil & Gas Lease No.

Lease Name or Unit Agreement Name  
Hagaman 34

Well No.  
1

Pool name or Wildcat  
Wildcat, Morrow

**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 ☒  
Nearburg Producing Company

Address of Operator  
3300 North "A" Street, Building 2, Suite 120, Midland, TX 79705 (915) 686-8235

Well Location  
Unit Letter 1 : ~~330~~ Feet From The North Line and 300 Feet From The East Line  
Section 3 Township 17S Range 25E NMPM Eddy County

Elevation (Show whether DF, RKB, RT, GR, etc.)  
3,511' GR

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 ANBANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: Intermediate Casing and Cement ☒

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.

Drilled to 1,213'. C&C hole. RU and run 29 jts 8-5/8", 24#, K55, STC casing to 1,213'. Cement casing using 880 sxs cement plus additives. Did not circ cmt. Run temp survey. TOC @ 600'. Tag cement at 613'. Pumped 100 sxs of cement. TOH w/1". WOC. TIH w/1" and found TOC at 562'. Pumped 250 sxs cement. Circ 20 sxs cmt to surface. WOC. ND BOPE. Cut off wellhead and weld on wellhead. NU BOPE and test.



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

SIGNATURE Kim Stewart TITLE Regulatory Analyst DATE 06-15-99

TYPE OR PRINT NAME Kim Stewart TELEPHONE NO. (915)686-8235

(This space for State Use)

APPROVED BY Jim W. Brown TITLE District Supervisor DATE 6-21-99

CONDITIONS OF APPROVAL, IF ANY: