

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION  
P.O. BOX 2088  
SANTA FE, NEW MEXICO 87501  
**RECEIVED BY**  
**APR 11 1984**  
**O.C.D.**  
**ARTESIA OFFICE**

Form C-103  
Revised 10-1-79

5a. Indicate Type of Lease  
State ☒ Fee ☐

5. State Oil & Gas Lease No.  
**B-7017**

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.)

|                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                              |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-<br>2. Name of Operator<br><b>J.E.M. Resources</b> ✓<br>3. Address of Operator<br><b>P.O. Box 2938 Ruidoso, N.M. 88345</b><br>4. Location of Well<br>UNIT LETTER <b>F</b> <b>1650</b> FEET FROM THE <b>North</b> LINE AND <b>1650</b> FEET FROM<br><b>West</b> THE <b>4</b> LINE, SECTION <b>17S</b> TOWNSHIP <b>29E</b> RANGE <b>4</b> N.M.P.M. | 7. Unit Agreement Name<br><b>C.P.U.</b><br>8. Farm or Lease Name<br><b>Cave Pool Unit</b><br>9. Well No.<br><b>57</b><br>10. Field and Pool, or Wildcat<br><b>Cave GB/SA</b><br>15. Elevation (Show whether DF, RT, GR, etc.)<br><b>3589 GR</b><br>12. County<br><b>Eddy</b> |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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

PERFORM REMEDIAL WORK ☐  
TEMPORARILY ABANDON ☐  
PULL OR ALTER CASING ☐  
OTHER ☐  
PLUG AND ABANDON ☐  
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER ☒ **Perf and stim**  
ALTERING CASING ☐  
PLUG AND ABANDONMENT ☐

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 1703.

3-19-84 Rig up pulling unit pressure test csng to 1000# held 30 min. Perf San Andres 2421-2500 w/24 .42 cal shots. Acid w/ 5250 gal 15% HCL inj 6 BPM @ 3500 PSI. ISDP 2350 15 min 2160# Flow well back.

3-22-84 Frac pef 2421-2500 w/ 35,00 gal gel KCL wtr + 50,000# 20/40 sd. inj 25 BPM @ 3950 ISDP 1650 15 min 1450#.

3-23-84 Swab well back

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

SIGNED *[Signature]* TITLE Geologist DATE 4/11/84

APPROVED BY *[Signature]* TITLE Geologist DATE 4-11-84

CONDITIONS OF APPROVAL, IF ANY: