

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

AMENDMENT REPORT *

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
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-015-26413
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. N/A
7. Lease Name or Unit Agreement Name ARTESIA STATE COM.
8. Well No. 3
9. Pool name or Wildcat * PALMILLO DRAW (ATOKA)
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3509 - 7

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR TO ABANDON A
DIFFERENT RESERVOIR. USE APPLICATION FOR PERMIT
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	2. Name of Operator PENNZOIL PETROLEUM COMPANY
3. Address of Operator P O BOX 50090, MIDLAND, TEXAS 79710-0090	4. Well Location Unit Letter F : 1980 Feet From The North Line and 2100 Feet From The West Line Section 23 Township 18S Range 28E NMPM Eddy County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3509 - 7	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

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. RECOMPLETION PROCEDURE:

- MIRU PU. ND WD & NU BOP.
- RIH w/blanking tool & set in pkr. Release on-off tool. Pull up & swab backside dry. POOH w/tbg & on-off tool.
- RIH w/tbg, Model R pkr, & gun assembly. Set pkr at 10100'+/- . Correlate w/Halliburton SP-DSN log dated 9/22/90 and Accoustic Cement Bon log (CCL) date 9/30/90.
- Test back side to 3000#. Drop bar & perf Atoka 10156-10162' w/4 SPF (28 holes) as per Halliburton SP-DSN log.
- Flow test.
- If necessary, acidize Atoka perms 10156-10162' w/1500 gal 50 quality foamed 15% NEA and 30 RCN BS spaced evenly throughout treatment at 3-4 BPM, Max P 4000#, as follows:
 - 10000 SCF Nitrogen pad
 - 1500 gal 50 quality foamed 15% NEA and 30 RCN BS
 - 15000 SCF Nitrogen flushFlow well back and test.

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

SIGNATURE Sharon K Hindman TITLE Production Assistant DATE 10/10/94
TYPE OR PRINT NAME Sharon K. Hindman TELEPHONE NO. 915 686-3505

(This space for State Use)

SUPERVISOR, DISTRICT II

APPROVED BY _____ TITLE _____ DATE NOV 4 1994

CONDITIONS OF APPROVAL, IF ANY:

* Please note that correction has been made on Item #9.