

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
Santa Fe, New Mexico 87504-2088

SEP 09 1992

O. C. D.
DISTRICT OFFICE

WELL API NO. 30-015-27035
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. 647
7. Lease Name or Unit Agreement Name McNUTT STATE
8. Well No. 90
9. Pool name or Wildcat Artesis (Q, G, S.A.)

Unit Letter <u>M</u> : <u>920</u> Feet From The <u>South</u> Line and <u>1095</u> Feet From The <u>West</u> Line
Section <u>21</u> Township <u>18S</u> Range <u>28E</u> NMPM <u>Eddy</u> County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) GR 3573'

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. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator
Plains Petroleum Operating Company ✓

3. Address of Operator
415 West Wall, Suite 1000, Midland, Texas 79707

4. Well Location
Unit Letter M : 920 Feet From The South Line and 1095 Feet From The West Line
Section 21 Township 18S Range 28E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
GR 3573'

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input 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 checked="" 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.

09-01-92
MIRUSU. Unseat pump. POOH w/rods, pump. ND wellhead. POOH strapping tbq, SN, PS, MA. PU & RIH w/2-7/8" X 5-1/2" RBP, SN, 2-7/8" tbq. Set RBP @ 2530'. Release tbq from RBP & pull to 2436'. NU wellhead. RU acidizer. Load hole w/55 bbl 2% KCL. Psi RBP to 1000#. Held O.K. Release psi. Spot 500 gal 15% NEFE HCL to EOT. POOH w/tbg. RU wireline. RIH w/4" HSC. Tag RBP @ 2530'. Correlate depth. Perforate 2147, 48, 49, 50, 2214, 15, 67, 95, 96, 2309, 10, 11, 26 in 3 runs w/1-1 JSPF. Perforate 2415, 16, 17, 18, 19, 20, 21, 22, 23 in 1 run @ 2 JSPF. Perf data: 90' phasing, .52" EHD, 19.5 GM, 20.83" cmt penetration. POOH & RD wireline. PU & RIH w/2-7/8" X 5-1/2" pkr, SN, 2-7/8" tbq. Set pkr @ 1911'. Displace HCL to btm perf w/14 bbl 2% KCL. Release pkr. RIH w/tbg & set pkr @ 2376'. NU wellhead. Acidize Upper San Andres perfs w/1000 gal 15% NEFE HCL containing 27 - 7/8" ball sealers. Lost prime when started flush & did not ball out. Flush w/15 bbl 2% KCL. Pmax 2230#, Pavg 2000#, AIR 3.8 BPM, ISIP 800#. Vacuum in 2 min. RD acidizer. Open well to pit. Flow & swab back 40 BLW. Tbg dry. SI well. SDFN. Prep acidize Premier/Metex @ rpt time.

09-03-92
Open well w/50# SICP & backflowed to pit. PU & RIH w/overshot, 2-7/8" tbq. Tag fill @ 966 FFS (1419' fill). NU JU head. RU reverse unit. Establish reverse circulation. Clean sand to RBP @ 2385'. Catch & release RBP. POOH w/tbg, RBP. RD reverse unit. RU wireline. RIH w/5-1/2" CIBP & set @ 2510'. POOH w/wireline. PU & RIH w/4" HSC & perforate 2 JSPF @ 2147' TO 2326'. Total 26 holes. Perf data: 90' phasing, 0.52" EHD, 19.5 GM, 20.83" cmt penetration. PU & RIH w/dump bailer. Dump 2 sx cmt on CIBP. POOH & RD wireline. Prep to run production eqpt this a.m.

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

SIGNATURE Bonnie Husband TITLE Office Manager/Tech. DATE 09-08-92
TYPE OR PRINT NAME Bonnie Husband TELEPHONE NO. 915/683-4434

(This space for State Use) ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II
APPROVED BY _____ TITLE _____ DATE SEP 11 1992
CONDITIONS OF APPROVAL, IF ANY: