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State of New Mexico

Form C-103

bu' mit 3 copies o Appropriate District Office	cnergy, Minerals and Nat	ural Resources Department	Revised 1-	1-89
DISTRICT I	OIL CONSERVA	ATION DIVISION	WELL API NO.	
P.O. Box 1980, Hobbs, NM 88240	P.O. Bo		30-015-27675	
Santa Fe, New Mexico 87504-2088			5. Indicate Type of Lease	
P.O. Box Drawer DD, Artesia, NM 88210				
<u>DISTRICT III</u> 1000 Rio Brazos Rd., Aztec, NM 8	27410		6. State Oil / Gas Lease No. LC-029420-B	
SUNDRY	NOTICES AND REPORTS OF	N WELL		
(DO NOT USE THIS FORM FOR	PROPOSALS TO DRILL OR TO D ESERVOIR. USE "APPLICATION RM C-101) FOR SUCH PROPOSA	FOR PERMIT"	7. Lease Name or Unit Agreement Name DOW B 33 FEDERAL	
1. Type of Well: OIL WELL	GAS WELL OTHER	120.7		
2. Name of Operator TEXACO	O EXPLORATION & PRODUCTION	N INC.	8. Well No.	
3. Address of Operator P.O. BC	OX 730, HOBBS, NM 88240		9. Pool Name or Wildcat CEDAR LAKE, EAST (MORROW)	
Well Location Unit LetterC	: 660 Feet From The	NORTH Line and 2310	Feet From The WEST Line	
Section 33		Range 31E NI		
	10. Elevation (Show whethe	or DF, RKB, RT,GR, etc.) GR-3754	', KB-3773'	
11. Chec	ck Appropriate Box to Indica	ate Nature of Notice, Repo	rt, or Other Data	
NOTICE OF INTEN	• • •		UBSEQUENT REPORT OF:	
	PLUG AND ABANDON	REMEDIAL WORK	☐ ALTERING CASING	
PERFORM REMEDIAL WORK	CHANGE PLANS	COMMENCE DRILLING OF	PERATION PLUG AND ABANDONMENT	
TEMPORARILY ABANDON		CASING TEST AND CEME	ENT JOB	
PULL OR ALTER CASING OTHER:	İ	OTHER:	perforating additional Morrow pay	
12. Describe Proposed or Complete	ted Operations (Clearly state all p	ertinent details, and give pertin	ent dates, including estimated date of starti	ng
any proposed work) SEE RULE 3/8/94 - 3/16/94	: 1103.			
	TOH w/tbg and pkr. Set CIBP @	11,800'		
		PR 2 7 1994		
3) Set pkr @ 11,624'.				
4) MIRU wireline w/5,000 psi lub	oricator. Perforate Morrow from 11,7	735'-11,754'.		
5) Clean up/flow well.				
6) Run State 4-Point test.			N M	
7) Return well to production.	(24 HOUR TEST)		1 1 my	
FINAL TEST: DATE: 4/14/94 OIL: 290/BO GAS: 12116/MCF WATER: 0/BW		Ray	and controlled	
I hereby certify that the information above is true a	and complete to the best of my knowledge and belie	Engineering Accietant	DATE <u>4/21/94</u>	· · ·
TYPE OR PRINT NAME	Darrell J. Carriger		Telephone No. 397-0431	

____TITLE_____

_DATE____

RECEIVE

APR 2 9 1994

OFFICE