

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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WATER CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

RECEIVED

Form C-103
Revised 10-1-78

JAN 19 1983

O. C. D.

ARTESIA, OFFICE

5a. Indicate Type of Lease State: <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No. E-7668

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- WIW	7. Unit Agreement Name
2. Name of Operator Sun Exploration & Production Co. ✓	8. Farm or Lease Name East Millman Pool Ut. Tr 7
3. Address of Operator P.O. Box 1861 Midland, Texas 79702	9. Well No. 5
4. Location of Well UNIT LETTER J 2310 FEET FROM THE South LINE AND 2310 FEET FROM THE East LINE, SECTION 13 TOWNSHIP 19-S RANGE 28-E NMPLA.	10. Field and Pool, or Wildcat Millman (Q-G) East
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Eddy

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPER. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	

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 1103.

This well is T.A.'d.

The procedure is being written to try & convert this water injection well to a producing oil well. Additional perfs will be added to the Grayburg-San Andres. If this workover is not successful the well will be plugged.

Since this zone is isolated from the fresh water zones and other nearby wells are injecting into this producing zone in this waterflood project; the fresh water zones should be protected.

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

SIGNED Dee Ann Kemp TITLE Accounting Assistant II DATE Jan. 17, 1983

Original Signed By

Leslie A. Clements

JAN 20 1983

APPROVED BY _____ TITLE Supervisor District II DATE _____

CONDITIONS OF APPROVAL, IF ANY: