

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

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.
30-015-02292

Indicate Type of Lease
STATE ☒ FEE ☐

State Oil & Gas Lease No.

Lease Name or Unit Agreement Name
State 648

Well No.
175

Pool name or Wildcat
Artesia, QN-GB-SA

Well Location
Unit Letter G 1880 Feet From The North Line and 1980 Feet From The East Line
Section 22 Township 19S Range 28E NMPM Eddy County

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

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.)

Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER

Name of Operator
Melrose Operating, Co.

Address of Operator
PO Box 5061, Midland, TX 79704

Well Location
Unit Letter G 1880 Feet From The North Line and 1980 Feet From The East Line
Section 22 Township 19S Range 28E NMPM Eddy County

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

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Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

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

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ANBANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

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.

Existing Casing Condition:

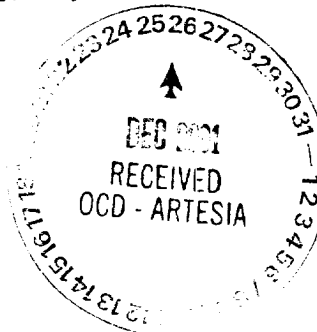
7" @ 481'. Cmt w/75 sx. TOC Calc Surf
4-1/2" @ 1214'. Cmt w/50 sx. TOC Calc 570'

Perfs: 1100' - 1215'

Propose to P&A as follows:

Set 25 sx plug 1215 - 865' -- T49
Cut & pull 4-1/2" @ 570'
Spot 35 sx plug 570' - 431' 40' 20' - T49
Spot 10 sx surface plug
Install marker

Notify OCD 24 hrs. prior to any work done



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

SIGNATURE Chuck Morgan TITLE Agent DATE 12-18-01

TYPE OR PRINT NAME Chuck Morgan TELEPHONE NO. 915/685-1761

(This space for State Use)

APPROVED BY [Signature] TITLE Field Rep ID DATE 1-10-02

CONDITIONS OF APPROVAL, IF ANY: