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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-101
Effective 1-1-65

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SUNDY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR OPERATIONS TO BE DONE IN A DIFFERENT RESERVOIR.
(SEE APPLICATION FOR PERMIT - 101-102-103 FOR SUCH PURPOSES.)

SEP 01 '88

Oil Well ☒ Gas Well ☐ Other ☐

Name of Operator

MorOilCo., Inc.

O. C. D.

Address of Operator

P.O. Drawer I, Artesia, NM 88210

ADDRESS OFFICE

Location of Well

P

660

East

760

UNIT LETTER FEET FROM THE LINE AND FEET FROM

THE South LINE, SECTION 26 TOWNSHIP 19S RANGE 29E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
KB 3334', GL 3320'

5a. Indicate Type of Lease

State ☒

Free ☐

5. State Oil & Gas Lease No.

L-3355

7. Unit Agreement Name

--

8. Form of Lease Name

PETCO STATE

9. Well No.

1

10. Field and Pool, or Valued

PARKWAY STRAWN

12. County

EDDY

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

FORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

REMEDIAL WORK ☒

ALTERING CASING

INCREASELY ABANDON ☐

COMMENCE DRILLING OPER.

PLUG AND ABANDONMENT

OR ALTER CASING ☐

CHANGE PLANS ☐

CASING TEST AND CEMENT JOBS ☐

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.

27 Aug 1988

1. Pulled rods and tubing. No evidence of tight spot in casing at 6700 feet.
2. Repaired damaged tubing anchor.
3. Established standing fluid level at 1488 feet from surface. Oil on top of fluid.

29 Aug 1988

1. Ran in hole with rods and tubing and put back on pump.
2. Over next few days will evaluate response to pumping.
3. Will collect water samples for comparison to establish possibility of hole in casing.
4. Depending on information from 2 & 3 above, may come out of hole with rods and tubing and run Schlumberger PAL log to locate hole in casing.

30 Aug 1988

1. Changed balance on pump jack and resumed pumping.
2. Pumping a good oil cut.

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

James E. McCallum

TITLE *Office Manager*

DATE *8/31/88*

Original Signed By

Mike Williams

TITLE

SEP 6 1988

DATE

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DESIGNATIONS OF APPROVAL, IF ANY