

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-99

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, 87505

WELL API NO.

30-015-21971

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.
648

7. Lease Name or Unit Agreement Name

DHY STATE "B"

8. Well No.

1

9. Pool name or Wildcat
MILLMAN WOLFCAMP

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

I.T. CORPORATION

3. Address of Operator

3214 W. PARK ROW, SUITE L

4. Well Location

Unit Letter L : 1980 Feet From The SOUTH Line and 990 Feet From The WEST Line

Section 11 Township 19S Range 28E NMPM EDDY County

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

3477 GR

11. 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 ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

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.

WELL SHUT IN.

RECOMPLETION SCHEDULE CALLS TO START PERFORATING AND ACIDIZING THE DOLOMITE ZONES.
TEST THE SECOND SANDSTONES WITH PERFORATION AND ACIDIZING.

* Run + set CIBP @ 10,400' w/35' cement on Top of CIBP.

* Run + set CIBP @ 8820' w/35' cement on Top of CIBP.

* Notify N.M.O.C.D. to witness Plugback Actions.

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

SIGNATURE

TITLE

PRESIDENT

DATE

01/16/01

TYPE OR PRINT NAME

K.W. CHEN

TELEPHONE NO. 817 755 8610

(This space for State Use)

APPROVED BY

Mrs. S. Stoddard

TITLE

Envir. Eng. Spec. I

DATE

5/15/2001

CONDITIONS OF APPROVAL, IF ANY: