

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

APR 16 1992

O. C. D.

WELL API NO.

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

North Lake McMillan

8. Well No.

1

9. Pool name or Wildcat

Undesignated San Andres

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

Robert N. Enfield

3. Address of Operator

P. O. Box 2431, Santa Fe, NM 87504-2431

4. Well Location

Unit Letter J : 1980 Feet From The South Line and 1980 Feet From The East Line

Section 12

Township 19 South Range 26 East

NMPM

Eddy

County

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

3289 G.L.

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.

1. Set a CIBP @ 1450' and cap with 35' of cement.
2. Spot a 35 sx cement plug at 375'.
3. Spot a 10 sx cement plug from 30' to surface.
4. Cut off wellhead, install dry marker and clean up location.

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

SIGNATURE

Robert N. Enfield

TITLE

Operator

DATE

4/14/92

TYPE OR PRINT NAME

Robert N. Enfield

TELEPHONE NO. 505-988-2863

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

SUPERVISOR, DISTRICT II

APPROVED BY

TITLE

DATE

APR 23 1992

CONDITIONS OF APPROVAL, IF ANY:

Notify N.M.O.C.D. in sufficient time to witness

Plugging