

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. 30-015-23049 |
| Indicate Type of Lease STATE _____ FEE <input checked="" type="checkbox"/> |
| State Oil & Gas Lease No. |
| Lease Name or Unit Agreement Name Parino |
| Well No. 1 |
| Pool name or Wildcat Dagger Draw, Upper Penn, North |

| | |
|---|--|
| 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 <input checked="" type="checkbox"/> OTHER _____ | |
| Name of Operator Nearburg Producing Company | Well No. 1 |
| Address of Operator 3300 N A St., Bldg 2, Suite 120, Midland, TX 79705 | Pool name or Wildcat Dagger Draw, Upper Penn, North |
| Well Location Unit Letter I 1980 Feet From The South Line and 660 Feet From The East Line Section 23 Township 19S Range 25E NMPM Eddy County | |
| Elevation (Show whether DF, RKB, RT, GR, etc.) 3417' GR | |

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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: Temporarily Abandon ☒

¹²Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Nearburg Producing Company has temporarily abandon the above referenced well.

- 1.) MIRU well service unit. 06/25/01
- 2.) POOH w/ production equipment. 06/25/01
- 3.) Set CIBP at 7750' w/ 35' cmt on top. New PBTD at 7715'. (Perfs 7796' - 7820'). 06/25/01
- 4.) Circulate with pkr fluid. 06/25/01
- 5.) Run M.I.T. @ 500# for 30 mins test pressure. 06/27/01
- 6.) RDMO well service unit. 06/27/01

Test failed



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

SIGNATURE

Kim Stewart

TITLE Regulatory Analyst

DATE 07-11-01

TYPE OR PRINT NAME Kim Stewart

TELEPHONE NO. 915/686-8235

(This space for State Use)

APPROVED BY

Denied

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

FEB 1 2002

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