

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-73

5a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.
E - 1051

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO OPEN OR PLUG BACK TO AN EXISTING WELL.
USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

RECEIVED BY

JUL -3 1986

O. C. D.

ARTESIA, OFFICE

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐
2. Name of Operator
Floyd M. Osbourn - Helen M. Osbourn
3. Address of Operator
203 East Main St. Artesia, N.M. 88210
4. Location of Well
UNIT LETTER E, 1650 FEET FROM THE N LINE AND 340 FEET FROM
THE W LINE, SECTION 17 TOWNSHIP 19S RANGE 28E NMPM.

7. Unit Agreement Name
8. Farm or Lease Name
Warren State
9. Well No.
2 - Y
10. Field and Pool, or Wildcat
Millman - Grayburg
12. County
Eddy

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

3526 GR.

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

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

REMEDIAL WORK ☒
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

17. 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.

6-16-86 Move Cable Tool Rig on Well. Pulled Rods Tubing. Rods had parted.

6-17-86 Clean out Well with 4½" Bailor to 1974 Ft. Ran in 10 BBLs. Water & 100 Lbs. Caustic let set overnight.

6-18-86 Bail Well Clean. Install Tubing, New Pump and Rods. Put on Production.

6-21-86 24 Hour Test Pump - 16 BOPD 0 Water.

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

SIGNED Floyd M. Osbourn TITLE Owner DATE 6-30-86

Original Signed By
Les A. Clements

APPROVED BY Supervisor District 11 TITLE DATE JUL 7 1986

CONDITIONS OF APPROVAL, IF ANY: