

10 Appropriate  
District Office

Ex Minerals and Natural Resources Department

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**  
2040 Pacheco St.  
Santa Fe, NM 87505

|                              |                                                                        |
|------------------------------|------------------------------------------------------------------------|
| WELL API NO.                 | 30-015-20319                                                           |
| 5. Indicate Type of Lease    | STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No. | LG 2724                                                                |

**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.)

|                                   |                    |
|-----------------------------------|--------------------|
| Lease Name or Unit Agreement Name | Featherstone State |
| 2. Well No.                       | 2                  |
| 9. Pool name or Wildcat           | Millman - Grayburg |

|                                                                                                                                                         |                       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|
| 1. Type of Well:<br>OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>                       | APR 01 1997           |
| 2. Name of Operator<br>Southwest Royalties, Inc.                                                                                                        | OIL CONSERVATION DIV. |
| 3. Address of Operator<br>P. O. Box 11390 Midland, TX 79702                                                                                             |                       |
| 4. Well Location<br>Unit Letter 0 : 2310 Feet From The East Line and 990 Feet From The South Line<br>Section 18 Township 19S Range 28E NMPM Eddy County |                       |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.)<br>3517 GL.                                                                                          |                       |

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.

3-3-97 - MIRU, nipple down wellhead, run in hole with tubing load hole w/mud laden fluid. Pumped plug #1, 30 sxs at 1800'. WOC and tagged plug #1 1607'. Laid down Tbg. and shut well in for the day.

3-4-97 - Open well, 0 psi. Run Tbg. to 1200' and pumped plug #2, 25 sxs at 1200'. WOC and tagged plug #2 at 1137' w/wireline. Perf csg. at 450', ran in hole with packer and sqz plug #3, 50 sxs, circulated cement to surface, no tag needed. Dug out cellar, cut off wellhead and spotted 15 sx surface plug 10' to surface. Set dry hole marker, cut off dead-men, covered pit, leveled and cleaned location. Job complete.

Post ID-2  
5-23-97  
PFA

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

SIGNATURE James Blount TITLE AREA SUPERVISOR DATE 3-27-97  
TYPE OR PRINT NAME JAMES BLOUNT TELEPHONE NO. 915-686 9927

(This space for State Use)

APPROVED BY [Signature] TITLE Field Rep DATE 2/14/98

CONDITIONS OF APPROVAL, IF ANY: