

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 87501

MAY 18 1992

O. C. D.

WELL API NO.  
30001521758

5. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.  
K6527

7. Lease Name or Unit Agreement Name

Eddy FV State Com

8. Well No.  
#1

9. Pool name or Wildcat  
NE Avalon Atoka

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  
Premier Production Co. ✓

3. Address of Operator  
P.O. Box 1246, Artesia, NM 88210

4. Well Location  
Unit Letter H : 1980 Feet From The North Line and 990 Feet From The East Line  
Section 25 Township 20S Range 27E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3352' 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. Amended Application of March 4, 1992

Rig up well service unit. Install BOP. Pull tubing, Vann System packer & guns. Go in hole w/wireline; set castiron BP at 10,820' to isolate Morrow. Dump 35' cement on top of plug. Set castiron BP at 10,380' to isolate Atoka & dump 35' cement on top of plug. Go in hole w/casing gun & perforate 10,014' - 10,028'; 2 shots per foot. Go in hole w/tubing & packer & breakdown perms w/1000 gal. 15% NEFE HCL acid. Swab & test.

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

SIGNATURE \_\_\_\_\_ TITLE owner/operator DATE May 18, 1992  
TYPE OR PRINT NAME LARRY JONES TELEPHONE NO. 748-2093

(This space for State Use)

ORIGINAL SIGNED BY  
MIKE WILLIAMS  
SUPERVISOR, DISTRICT II

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE MAY 18 1992

CONDITIONS OF APPROVAL, IF ANY: