

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

JUL 14 1993

WELL API NO.

30-015-22055

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

E2597

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 *Disposal Well*

2. Name of Operator

DEL TAYLOR

7. Lease Name or Unit Agreement Name

Exxon State

8. Well No.

8

3. Address of Operator

1403 W. EDWARD, Carlsbad NM 88202

9. Pool name or Wildcat

Magruder Yates

4. Well Location

Unit Letter *#8* : *0* Feet From The *1268* Line and *5* Feet From The *2032* Line

Section *15* Township *21S* Range *27E* NMPM *EDDY* County

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

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

REMEDIAL WORK ☐

ALTERING CASING ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

PULL OR ALTER CASING ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

OTHER: *Tested casing* ☐

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.

Johnny Robinson came out to my lease and  
I pumped or hydropped the casing (well) to 3001B<sup>s</sup> for  
15 minutes. Tested Good, Held O.K. Passed Test!  
at 12:45 to 1:45 P.M. 7/13/93

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

SIGNATURE

*Del Taylor*

TITLE

*operator*

DATE

*7/14/93*

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

APPROVED BY

*Johnny Robinson*

TITLE

OIL AND GAS INSPECTOR

DATE

*JUL 21 1993*