

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

NOV 13 1995

WELL API NO.

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

V-737

7. Lease Name or Unit Agreement Name

Greenhill State

8. Well No.

1

9. Pool name or Wildcat

Avalon Bone Spring, E.

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

Manzano Oil Corporation 505/623-1996

3. Address of Operator

P.O. Box 2107/Roswell, NM 88202-2107

4. Well Location

Unit Letter B : 660 Feet From The North Line and 1980 Feet From The East Line

Section 36 Township 20 South Range 28 East NMPM Eddy County

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

3225.2' GR

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.

Tag plug at 8610'. Fill hole w/Fluid.
1. Set CIBP above Bone Spring Perfs @ 6625'. Top w/35 sx cement.

Set 100' Plug across shoe at 3135
2. Set 100' plug in and out of 7-5/8" stub from 2876 back to 2476'. (Tag)
500 2500 3000'

3. Set 100' plug at 16" shoe from 750' back to 650'. (Tag)

4. Set 10 sks surface plug.

5. Install dry hole marker.

Notify OCD Prior to plugging well to witness TAGS.

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

SIGNATURE Allison Hernandez

TITLE Engineering Technician

DATE 11/09/95

TYPE OR PRINT NAME Allison Hernandez

TELEPHONE NO. 505/623-1996

(This space for State Use)

ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR

NOV 27 1995

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: