

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

WELL API NO

30-015-27559

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

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.)

RECEIVED

1. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

2. Name of Operator

Collins & Ware, Inc.

JUN 22 '94

8. Well No.

2

3. Address of Operator

508 W. Wall, Suite 1200, Midland, Texas 79701

O. C. D.

ARTESIA, OFFICE

9. Pool name or Wildcat

Happy Valley (Delaware)

4. Well Location

Unit Letter H : 2100 Feet From The North Line and 660 Feet From The East Line

Section

32

Township

22S

Range

26E

NMPM

Eddy

County

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

3319 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: Drilling permit extension

☒

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.

Collins & Ware, Inc. respectfully requests an extension of the permit to drill the above well. The original permit expires on 7/25/94.

We would appreciate your granting us this request.

APPROVAL VALID FOR 180 DAYS
PERMIT EXPIRES 1-25-95
UNLESS DRILLING UNDERWAY

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

SIGNATURE

Dianne Sumrall

TITLE

Production Clerk

DATE

7/21/94

TYPE OR PRINT NAME

Dianne Sumrall

TELEPHONE NO. 915 687-3435

(This space for State Use)

SUPERVISOR, DISTRICT II

APPROVED BY

TITLE

DATE

JUL 27 1994

CONDITIONS OF APPROVAL, IF ANY: