

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.
30-015-29353

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.
K6599

7. Lease Name or Unit Agreement Name

State of New Mexico 20

8. Well No.

1

9. Pool Name or Wildcat

Burton Flat; Morrow Gas

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 ☐

JUL 25 1997

2. Name of Operator

KCS Medallion Resources, Inc.

3. Address of Operator

7130 South Lewis Ave., Ste 700, Tulsa, OK 74136

4. Well Location

Unit Letter A ; 990 Feet From The North Line and 990 Feet From The East Line

Section 20 Township 20S Range 28E NMPM Eddy County

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

GL=3242' RKB=3257'

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 ☐

SELL 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.

Proposed remedial work to commence July 26, 1997.

See attached procedure for details.

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

SIGNATURE

Terry L. Reeves
Terry L. Reeves

TITLE

Director, Cased Hole Operations

DATE

July 24, 1997

TYPE OR PRINT NAME

TELEPHONE NO.

918-491-4169

This space for State Use

ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR

APPROVED _____ TITLE _____

DATE

JUL 24 1997

CONDITIONS OF APPROVAL IF ANY: