

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  
RECEIVED  
FEB 2 1995  
Santa Fe, New Mexico 87504-2088

JAN 31 1995

WELL API NO. 39-015-20885
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. L-1649 & K-3403
7. Lease Name or Unit Agreement Name South Carlsbad Gas Com No. 2
8. Well No. 1
9. Pool name or Wildcat Und. Strawn

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR TO PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	
2. Name of Operator Rhombus Energy Company	
3. Address of Operator 200 N. Loraine, Suite 1270, Midland, TX 79701	
4. Well Location Unit Letter J : 1650 Feet From The South Line and 1980 Feet From The East Line Section 27 Township 23-S Range 26-E NMPM Eddy County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3289' GR	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: Plug back to the Strwn Zone <input checked="" type="checkbox"/>

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.

Nipple up BOP's. Pull 2 7/8" tubing. Set packer with plug @ 10,440' to plug off Atoka Formation 10,517-527'. Nipple down BOP's. Run 2 3/8" tubing and set packer @ 10,206'. Perf Strawn 10,290-398', 61 holes. Acidize with 10,000 gal HCl and 85 ball sealers. Swabbed.

F 450 MCFD, 0 BCPD, 30 BWPD, 300# FTP.

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

SIGNATURE Mabry Kniffen TITLE Admin. Asst. DATE 1/27/95  
(915)  
TYPE OR PRINT NAME Mabry Kniffen TELEPHONE NO. 683-8873

(This space for State Use)

ORIGINAL SIGNED BY TIM W. GUM  
DISTRICT II SUPERVISOR

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE FEB 9 1995

CONDITIONS OF APPROVAL, IF ANY: