

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

OCT 27 '89

WELL API NO.
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. L4241
7. Lease Name or Unit Agreement Name Carlsbad State
8. Well No. 1
9. Pool name or Wildcat South Carlsbad Morrow

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	ARTESIA, OFFICE
2. Name of Operator Samedan Oil Corporation	
3. Address of Operator 10 Desta Drive, Ste. 240#, Midland, TX 79705	
4. Well Location Unit Letter B : 660 Feet From The north Line and 1980 Feet From The east Line Section 34 Township 23S Range 26E NMPM Eddy County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3292 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.

Cut tbg @ 11,239', TOH, TIH w/WP, wash to pkr @ 11,299'. TOH w/WP, TIH w/OS, catch fish, rel on-off tool and TOH. TIH w/ER-2 retrieving head + 371 jts 2-3/8" N80 tbg. Set ret head. Press anl. 600# 15 mins, OK. NU WH. Put well on production.

Pat FD-3
1-31-92
dy up

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

SIGNATURE Nick Hood TITLE Engineer DATE 10-17-89
TYPE OR PRINT NAME Nick Hood TELEPHONE NO. 915/684-8491

(This space for State Use)

ORIGINAL SIGNED BY
MARK HAZARD
SUPERVISOR DISTRICT II

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

OCT 31 1989