

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.
30-015-21476

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.)

7. Lease Name or Unit Agreement Name

Martin #1

1. Type of Well:
OIL WELL ☐ GAS WELL ☒ OTHER

2. Name of Operator
Arlen Dickson

8. Well No.
1

3. Address of Operator
P.O. Box 50160

9. Pool name or Wildcat
Undesignated S. Carlsbad Atoka,
Sprawn

4. Well Location
Unit Letter F : 2198 Feet From The North Line and 1650 Feet From The W Line
Section 20 Township 22S Range 27E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3136.5 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.

11/27/95 MI equip., dug out cellar, PU Workover unit, NU ROP, PU Rev. Unit and drilled out plugs at 360', 1300', 1940', 4446', 6466', 8657', pressure testing casing after each plug is drilled.

12/7/95 Drilled out plug at 10,085', cir. hole clean, POH with bit and aobih with bit and scraper. Tagged bottom plug at 11,004'.
Casing tested to 1000#, no loss of pressure.

12/11/95 Set up perf. on 11/12/95

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

SIGNATURE Arlen Dickson TITLE President DATE 12-13-95

TYPE OR PRINT NAME Arlen Dickson TELEPHONE NO. 915-686-92

(This space for State Use)

APPROVED BY Jim W. Gorman TITLE District Supervisor DATE 12/20/95

CONDITIONS OF APPROVAL, IF ANY: