

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

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

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

OCT 18 1993

WELL API NO.

30-015-21777

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

K-6600

7. Lease Name or Unit Agreement Name

Nash Unit

8. Well No.

#4

9. Pool name or Wildcat

Nash Draw Cherry Canyon

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 SWD-511

2. Name of Operator

Strata Production Company

3. Address of Operator

P.O. Box 1030, Roswell, New Mexico 88202-1030

4. Well Location

Unit Letter A : 990 Feet From The North Line and 330 Feet From The East Line

Section 13

Township 23 South Range 29 East NMPM Eddy

County

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

3002' 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: Pressure Test ☒

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.

09/23/93: Pressure test casing to 525 # for 30 minutes. Test witnessed and approved by OCD Representative.

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

SIGNATURE

Carol J. Garcia

TITLE

Production Records Manager DATE 10/12/93

TYPE OR PRINT NAME

Carol J. Garcia

TELEPHONE NO. 622-1127

(This space for State Use)

APPROVED BY

Johnny Wilson

TITLE

OIL AND GAS SUPERVISOR

DATE

CONDITIONS OF APPROVAL, IF ANY:

