

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

CONSERVATION DIVISIO.

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.

30-015-23031

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Eugenie

8. Well No.

#2

9. Pool name or Wildcat

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 ☐

OTHER F/W Injection Well

2. Name of Operator

I&W, Inc.

B&E INC.

3. Address of Operator

P.O. Box 98 Loco Hills, New Mexico 88255

4. Well Location

Unit Letter M1 : 1288 Feet From The South Line and 497 Feet From The West Line

Section 17

Township 22S

Range 27

NMPM

Eddy

County

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

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.

November 8th 1999 Proposed: Rig up wireline unit, Run gauge rig & bars to Approximately 550' to check casing. Rig up C/I bridge plug to set in 2 7/8 casing. Set plug at approximately 285'. Then rig up tubing gun, 3 shots at 120 degrees perf 2 7/8 at 284'.

November 9th 1999 Continued: Rig up cement truck pump 25 sacks down 2 7/8 through perf and try to circulate cement up beside 2 7/8 casing inside 5 1/2 casing, to stop flow.

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

SIGNATURE

George Parchman

TITLE

Mgr.

DATE

11/3/99

TYPE OR PRINT NAME

George PARCHMAN

TELEPHONE NO. 505-885-6663

(This space for State Use)

APPROVED BY

Mae Stollfeld

TITLE

Field Rep. II

DATE

12/15/99

CONDITIONS OF APPROVAL, IF ANY: