

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 87508

DEC 06 1993

WELL API NO.
5. Indicate Type of Lease STATE ☐ FEE ☒
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name B.K.E.
8. Well No. 1
9. Pool name or Wildcat Undesignated Delaware

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 ☐ GAS ☐ OTHER ☒ SWD
2. Name of Operator Rowland Trucking Inc.
3. Address of Operator P.O. Box 340, Hobbs, NM 88241
4. Well Location Unit Letter <u>H</u> : <u>2310</u> Feet From The <u>North</u> Line and <u>860</u> Feet From The <u>East</u> Line Section <u>13</u> Township <u>23S</u> Range <u>27E</u> NMPM <u>Eddy</u> County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) <u>3053'</u>

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: Convert to S.W.D. ☒

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.

ORDER # SWD-495

1. Set C.I.B.P. @ 5600' and spot 25 sxs cement on top of plug.
2. Perforate Cherry Canyon from 4014-4220'. Acidize perfs with 5000 gals. 15% HCl.
3. Run packer and 2 7/8" internally plastic coated tubing. Load annulus with packer fluid. Set packer at 3950'.
4. Test casing to 500 psi for 30 minutes. Commence disposal operations.

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

SIGNATURE Marc L. Wise TITLE Agent DATE 11/12/93
TYPE OR PRINT NAME Marc L. Wise TELEPHONE NO 392-6950

(This space for State Use)

ORIGINAL SIGNED BY RAY SMITH

APPROVED BY Ray Smith TITLE OIL AND GAS INSPECTOR DATE DEC 23 1993
CONDITIONS OF APPROVAL IF ANY