

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 87505-2088

SEP 11 1991

WELL API NO. 30-015-
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Kimbley
8. Well No. 1
9. Pool name or Wildcat Undesignated Bone Spring

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	2. Name of Operator Bird Creek Resources, Inc.
3. Address of Operator 810 S. Cincinnati, Suite 110 Tulsa, OK 74119	4. Well Location Unit Letter G : 1830 Feet From The North Line and 2060 Feet From The East Line Section 21 Township 23-S Range 28-E NMPM Eddy County
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

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.

This well is currently open via 7 5/8" perfs in the Delaware @ 6038-6066', pumping 7 BOPD, 185 BWPD, and 8 MCFD. We propose to temporarily abandon the Delaware and attempt to test the Bone Spring as follows:

1. Set pkr. on workstring @ 6100'.
2. Perf Bone Spring selectively @ 6150-6415'. Set 7 5/8" CIBP @  $\pm$  7300'.
3. Acidize perfs w/2000 gal., then swab test for shows.
4. If shows warrant, frac well.
5. Swab back load and test well.
6. Evaluate to downhole commingle Delaware and Bone Spring, or abandon one over the other.

Form C-102 attached.

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

SIGNATURE Bill M. Burks TITLE Agent DATE 8-30-91  
TYPE OR PRINT NAME Bill M. Burks 918-582-3855 TELEPHONE NO.

(This space for State Use)

APPROVED BY [Signature] TITLE  DATE   
CONDITIONS OF APPROVAL, IF ANY: