

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

RECEIVED BY

SEP 16 1983

O. C. D.  
ARTESIA, OFFICE

Form C-103  
Revised 10-1-75

5a. Indicate Type of Lease

State ☐

Fee ☒

5. 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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator DINERO OPERATING COMPANY	8. Farm or Lease Name GIOVENGO
3. Address of Operator P. O. DRAWER 10505, MIDLAND, TEXAS 79702	9. Well No. 1
4. Location of Well UNIT LETTER <u>L</u> <u>1980</u> FEET FROM THE <u>South</u> LINE AND <u>660</u> FEET FROM THE <u>West</u> LINE, SECTION <u>25</u> TOWNSHIP <u>23-S</u> RANGE <u>28-E</u> NMPM.	10. Field and Pool, or Wildcat Und. <del>South Carolina Blue</del> Delaware
15. Elevation (Show whether DF, RT, GR, etc.) 2991	12. County EDDY

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐  
TEMPORARILY ABANDON ☐  
PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐  
CHANGE PLANS ☐

OTHER Perforate & Stimulate additional ☒  
Delaware Zones

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER ☐

ALTERING CASING ☐  
PLUG AND ABANDONMENT ☐

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

1. Set retrievable bridge plug at 6,160 ft.
2. Perforated at 6,013', 18', 25', 32', 38', 44', 54', and 6,060' with 2 JSPF (16 holes).
3. Acidized with 3,000 gallons of 15% HCL Acid.
4. Swab back acid load.
5. Retrieve bridge plug.
6. Put back on pump and test.

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

SIGNED Lawrence A. Clements

TITLE Production Supervisor

DATE 9/12/83

APPROVED BY \_\_\_\_\_

TITLE \_\_\_\_\_

Original Signed By  
Leslie A. Clements  
Supervisor District II

DATE \_\_\_\_\_

SEP 20 1983

CONDITIONS OF APPROVAL, IF ANY: