

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

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

Form C-103  
Revised 10-1-77

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SANTA FE	<input checked="" type="checkbox"/>
FILE	<input checked="" type="checkbox"/>
U.S.G.S.	
LAND OFFICE	
OPERATOR	<input checked="" type="checkbox"/>

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.)

OIL WELL ☐ GAS WELL ☒ OTHER ☐

1. Name of Operator

Coquina Oil Corporation

2. Address of Operator

P. O. Drawer 2960 Midland, Texas 79702

3. Location of Well

UNIT LETTER E 1980 FEET FROM THE North LINE AND 660 FEET FROM

THE West LINE, SECTION 22 TOWNSHIP 22S RANGE 27E NMPM.

7. Unit Agreement Name

8. Farm or Lease Name

Grandi

9. Well No.

1

10. Field and Pool, or Wildcat  
Undes South Carlsbad  
Morrow

11. Elevation (Show whether DF, RT, GR, etc.)

3097.5 GR

12. County

Eddy

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

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

PLUG AND ABANDON ☐  
CHANGE PLANS ☐

OTHER ☐

REMEDIAL WORK ☐  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOBS ☐  
OTHER Plug back, completion attempt ☒

ALTERING CASING ☐  
PLUG AND ABANDONMENT ☐

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1503.

RU Pulling Unit 1/16/83. Bled well down. Load tubing. TOH. Set CIBP @ 11,370' (Top of Morrow) & dump 40' cmt on CIBP. Set CIBP @ 9960' (Top of Penn) & dump 35' cmt on CIBP. Perf Wolfcamp w/4" casing gun 9826-9850', 2 spf, 50 holes, 0.40" diameter and 9002-9045', 2 spf, 86 holes, 0.40" diameter. Run tbq and packer. Set packer @ 8983'. 1/20/83-1/26/83 swab test well.

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

SIGNED Billy M. Pasche

TITLE Operations Supt.

DATE 2/2/83

Original Signed By  
Leslie A. Clements

APPROVED BY

TITLE Supervisor District II

DATE FEB 04 1983

CONDITIONS OF APPROVAL, IF ANY: