| Submit 3 Copies To Appropriate District Off. c   | State of New Mexico   |            | Form C-103                          |   |                      |              |  |  |
|--|---|------------|-------------------------------------|---|----------------------|--------------|--|--|
| D <sub>s</sub> strict I  | _nergy, Minerals and Natural Resources  |            | Revised March 25, 1999 WELL API NO. |   |                      |              |  |  |
| 1625 N. French Dr., Hobbs, NM 87240<br>District II   | OIL CONGERS   | ATION      | DIVICION                            | 30 - 015 - 24425                          |                      |              |  |  |
| 811 South First, Artesia, NM 87210   | OIL CONSERVATION DIVISION 2040 South Pacheco  |            |                                     | 5. Indicate Type of Lease                 |                      |              |  |  |
| District III<br>1000 Rio Brazos Rd., Aztec, NM 87410   |   |            |                                     | STATE FEE                                 |                      |              |  |  |
| District IV  | Santa Fe  | , INIVI 87 | 303                                 | 6. State Oil &                            | Gas Lease No.        |              |  |  |
| 2040 South Pacheco, Santa Fe, NM 87505   |   |            |                                     |   | L - 654              |              |  |  |
| SUNDRY NOTICES AND REPORTS ON WELLS  |   |            | 7. Lease Name                       | or Unit Agreem                            | ent                  |              |  |  |
| (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  |   |            | Name:                               |   |                      |              |  |  |
| PROPOSALS.)  | `   | Í          |                                     | New Mexico                                | "DI" State           |              |  |  |
| 1. Type of Well: Oil Well Gas Well   | Other   |            |                                     | TICW MEXICO                               | DI State             |              |  |  |
| 2. Name of Operator  |   |            | ·                                   | 8. Well No.                               |                      |              |  |  |
| ·  | ıssman Permian, L.I   |            | #155615                             | 0   | 1                    |              |  |  |
| 3. Address of Operator   | ······································  |            |                                     | 9. Pool name                              | or Wildcat           |              |  |  |
| 601 N Marien   | feld, Suite 508, Mid  | land, Te   | xas 79701                           | Dark Canyo                                | n Delaware, V        | Vest         |  |  |
| 4. Well Location   |   |            |                                     |   |                      |              |  |  |
| Unit Letter: E :   | 1880' feet from the   | North      | line and 6                          | 60° feet from                             | n the West           | line         |  |  |
| Unit Letter: E :   | 1000 leet from the  | 1,0111     |                                     | ooact not                                 |                      |              |  |  |
| Section 19   | Township 23 S   |            | ange 26 E                           | NMPM                                      | Eddy                 | County       |  |  |
|  | 1. Elevation (Show w  |            |                                     | c.)                                       |                      |              |  |  |
| 3430' GL  11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data   |   |            |                                     |   |                      |              |  |  |
| NOTICE OF IN   |   | ncate Na   |                                     | SEQUENT RI                                |                      |              |  |  |
| PERFORM REMEDIAL WORK  |   |            | REMEDIAL WOR                        |   | ALTERING C           | ASING 🗆      |  |  |
|  |   |            |                                     |   |                      |              |  |  |
| TEMPORARILY ABANDON  | CHANGE PLANS  |            | COMMENCE DR                         | IILLING OPNS. 🗌                           | PLUG AND<br>ABANDONM |              |  |  |
| PULL OR ALTER CASING   | MULTIPLE  |            | CASING TEST A                       | ND 🗀                                      | ABANDONW             | CIVI         |  |  |
|  | COMPLETION  |            | CEMENT JOB                          |   |                      | _            |  |  |
| OTHER:   |   |            | OTHER:                              |   |                      |              |  |  |
| 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.  |            |                                     |   |                      |              |  |  |
|  |   |            |                                     |   |                      |              |  |  |
| 1. MIRU. Pull out pump, rods and tubing. Pick up additional tubing as needed for a work string.  |   |            |                                     |   |                      |              |  |  |
| 2. RU wireline. Set CIBP a   | t 3950' and cap with  | 35' cer    | nent by bailer.                     | Shoot 2 squee                             | eze perfs at 6       | 75'.         |  |  |
| 3. Load hole with 10 PPG   | salt gel mud. TIH ar  | nd spot    | 25 sx plug acr                      | oss 8 <sup>5</sup> / <sub>8</sub> " inter | mediate casi         | ng shoe      |  |  |
| from 1700' to 1450'. Wo  | OC and tag plug. $ ightharpoonup$   | Place      | - 100, hlad                         | 808 40 90                                 | 6                    | . 1. 41      |  |  |
| 4. Establish circulation the   | 4. Establish circulation through squeeze perfs at 675'. Circulate 105 sx to the surface through the |            |                                     |   |                      |              |  |  |
| annulus. Close the surface casing valve and fill the casing to the surface with 70 sx.  5. Cut off wellhead and top off casing annulus if necessary. |   |            |                                     |   |                      |              |  |  |
| 6. Set dry hole marker. Clean location and remove remaining equipment.   |   |            |                                     |   |                      |              |  |  |
| •  |   |            | manning o dark                      |   |                      |              |  |  |
|  | nancieting of 10#   |            | N.                                  | otlify OCD 24 hrs. pr                     | dor to are made of   | 13           |  |  |
| Brine 10   | between each plug   |            | (44                                 | only OCD 24 lits. pi                      | NOT WELL             |              |  |  |
| must be placed   | Officers ones have  |            |                                     |   |                      |              |  |  |
| I hereby certify that the informatio   | n above is true and compl   | ete to the | best of my knowle                   | dge and belief.                           |                      | <del></del>  |  |  |
| 1111/1/1   |   |            | -                                   |   |                      |              |  |  |
| SIGNATURE AND IMPORTANT  | <del>-</del><br>  | _TITLE_    | Operations 1                        | <b>Engineer</b>                           | _DATE <del>9</del> - | 20-01        |  |  |
| Type or print name Robert McNaughton Telephone No. 915 - 682 - 4429  |   |            |                                     |   |                      |              |  |  |
|  | cryauguton  |            | relepho                             | ne No. 915 – C                            | 102 - 4427           |              |  |  |
| (This space for State use)   | 100   |            | A -11                               |   | ,                    |              |  |  |
| APPPROVED BY   | 1. <b>K</b>   |            | . 71 1/3/                           | 1 11 <b>a</b> 150                         | •                    |              |  |  |
|  |   | _TITLE_    | Sul O                               | Sel                                       | ,<br>DATE/           | <u>,4 01</u> |  |  |

## NADEL AND GUSSMAN PERMIAN

## New Mexico "DI" State No. 1

1880' FNL, 660' FWL, Unit E, Sec 19, 23S, 26E, Eddy County, NM API # 30-015-24425

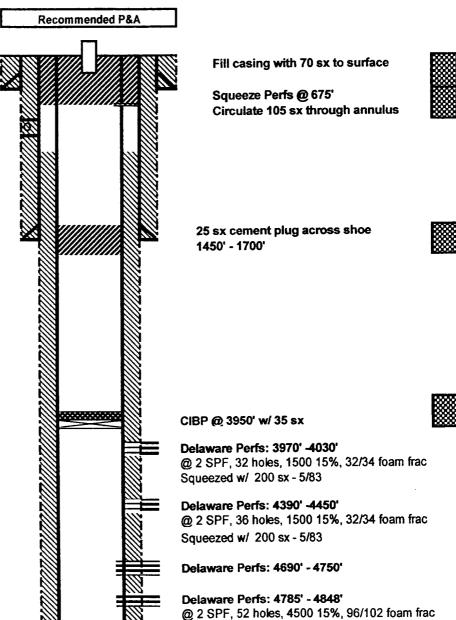
Elev: 3430' GL

13-3/8", 54.5#, @ 625' 475 sx, circulated 17-1/2" hole

DV Tool @ 858'
367 sx, DNC, cement fell back
1" to surface from 1016'
800 sx, 6 stages, circulated

8-5/8", 24#, K-55 @ 1593' 550 sx, circ. to DV tool? 11" hole

mp.



5-1/2", 17#, K-55 @ 5027' 800 sx, TOC @ 1096' by temp. 7-7/8" Hole

TD @ 5037'

PDTD @ 4890'

| Operator Nadel : Gussman Imicallic<br>Well Newherito DI #1<br>Unit E Section 19 Township 23 Range 24<br>API # 30 - 015-24425 | TOPS   |
|--|--|
| w<br>be  | BOAC UPSO  alt gel mud consisting of 10# brine with 25# of gel per barrel must be placed etween each plug install Dry Hole Marker  Notify OCD 24 brs. prior to any work done |
| Surface Plug 675' to Surface  Pert : Squeece Cont 675 to Surface  Salas  | erface   |
| 858's Continual Plug 808'to 908'  848  Continual Plug 808'to 908'  250' Plug 1450'to 1700' Tag  DV                           |  |
| 3950' LCTB1 W/35'2,114 3970' Parts 4848'   |  |
| 51/2<br>5027 duc   | ٠,   |