

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

RECEIVED
OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088
FEB 08 89

O. C. D.
ARTESIA, OFFICE

WELL API NO.

30-015-26036

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. 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. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

2. Name of Operator

Parker & Parsley Petroleum Company ✓

3. Address of Operator

P. O. Box 3178, Midland, TX 79702

7. Lease Name or Unit Agreement Name

Pardue Farms 27

8. Well No.

7

9. Pool name or Wildcat

South Culebra Bluff
(Bone Spring)

4. Well Location

Unit Letter A : 560 Feet From The North Line and 560 Feet From The East Line

Section
27

Township
23-S

Range
28-E

NMPM

Eddy

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3036.1 GL, 3047.1 KB

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.

Set pkr @6290' to isolate Delaware perms 6040-6251' (9 holes) and pump test
Bone Springs perms 6295-7027' (36 holes) for 30 days.

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

SIGNATURE

Randy R. Johnson

TITLE

Operations Engineer

DATE 2-7-89

TYPE OR PRINT NAME

Randy R. Johnson

TELEPHONE NO. 915 683-4768

(This space for State Use)

Original Signed By
Mike Williams

TITLE

DATE

MAR 30 1989

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY: