

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

clsr
top

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.

30-015-26122

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.)

7. Lease Name or Unit Agreement Name

Pardue Farms 27

1. Type of Well:

OIL
WELL ☐

GAS
WELL ☐

OTHER

SWD

AUG 08 '89

2. Name of Operator

Parker & Parsley Petroleum Company

8. Well No.

8

3. Address of Operator

P. O. Box 3178, Midland, Texas 79702

9. Pool name or Wildcat

Delaware (Bell Canyon)

4. Well Location

Unit Letter H : 2069 Feet From The North Line and 632 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.)

3033.1 GR

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: Pressure annulus ☒

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.

7-27-89 Pressure 2 7/8" X 7" annulus to 740# for 6 hrs. - OK.
Tbg. pressure - 400#.
(Chart attached.)

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

SIGNATURE

J. Michael Reeves

TITLE

Dist. Operations Mgr.

DATE 8-7-89

TYPE OR PRINT NAME

J. Michael Reeves

TELEPHONE NO. 915 683-4768

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

SUPERVISOR, DISTRICT II

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: