

Submit 3 Copies
to Appropriate
District Office

| | |
|-------------|--|
| Santa Fe | |
| File | |
| BLM | |
| Land Office | |
| B of M | |
| Operator | |

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

c15F
Op

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

OIL CONSERVATION DIVISION

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

SEP 10 '90

| |
|---|
| WELL API NO. 30-015-26329 |
| 5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No. |
| 7. Lease Name or Unit Agreement Name Trachta |
| 8. Well No. 2 |
| 9. Pool name or Wildcat East Loving Delaware |

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK A
DIFFERENT RESERVOIR. USE APPLICATION FOR PERMIT
(FORM C-101) FOR SUCH PROPOSALS.)

| | |
|--|--|
| 1. Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER | 2. Name of Operator Bird Creek Resources, Inc. ✓ |
| 3. Address of Operator 1412 S. Boston, Ste. 550, Tulsa, Ok. 74119 | 4. Well Location Unit Letter <u>E</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>West</u> Line Section <u>14</u> Township <u>23S</u> Range <u>28E</u> NMPM <u>Eddy</u> County |
| 10. Elevation (Show whether DF, RKB, RI, GR, etc.) 3011' KB | |

| | |
|---|--|
| 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data | |
| NOTICE OF INTENTION TO: | SUBSEQUENT REPORT OF: |
| PERFORM REMEDIAL WORK <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> |
| OTHER: <input type="checkbox"/> | PLUG AND ABANDONMENT <input type="checkbox"/> |
| | CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/> |
| | OTHER: <input type="checkbox"/> |

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.

9-4-90 Drilled to 6222'. POH. Ran MLL-DNL-GR-CAL logs. RIH to circulate and condition hole prep to run 5 1/2" csg.

9-5-90 POH. Ran 74 jts 5 1/2" J-55 15.5# csg. to 6221' with DV tool at 3101'. Cmt 1st stage with 700 sx 50-50 Poz H + 2% gel, 5#/sx NaCl, .4% CFR 3 & .3% Halad 4. Tailed in with 200 sx Class C with 5#/sx NaCl & .2% CFR 3. Bumped plug with 2100# at 10:45 PM. Opened DV tool and circulated 210 sx to pit. WOC. 2nd stage 490 sx lite cmt with 1/4#/sx flocele & 15#/sx NaCl. Tailed in with 100 sx Class C, 2% CaCl2 and 5#/sx NaCl. No cement circulated. Set slips. CO csg. Release rig. WO completion unit.

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

SIGNATURE Bill M. Burks TITLE Agent DATE 9-5-90

TYPE OR PRINT NAME Bill M. Burks 918-582-3855 TELEPHONE NO.

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

SEP 14 1990