

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

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

MAY 24 '90

WELL API NO.

30-015-26330

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

Bird Creek Resources, Inc.

3. Address of Operator

1410 S. Boston Ste 550 Tulsa, Okla. 74119

4. Well Location

Unit Letter D : 660 Feet From The North Line and 660 Feet From The West Line

Section 14

Township 23S

Range 28E

NMPM

Eddy

County

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

2980.3 GR

7. Lease Name or Unit Agreement Name

Teledyne

8. Well No.

2

9. Pool name or Wildcat

Und. East Loving Delaware

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.

5-17-90 Drill to 6187'. Circ hole clean. POH. Log W/GR-CNL-DLL-MLL-Cal. TIH. Circ.

5-18-90 POH. LD DC & DP. Ran 149 jts 5½" 15.5 lbs J-55 LTC csg and set @ 6187'. Cmt in 2 stages: 1st stage 675 sx H-Poz 50/50 + 5 lbs salt. Tail in w/100 sx Class H + 5 lbs salt. Could not open DV tool for stage 2. Set slips. Cut off casing. Rel rig. WO Completion Unit.

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

SIGNATURE [Signature] TITLE Agent DATE 5-22-90

TYPE OR PRINT NAME O.H. Routh

TELEPHONE NO 915-687-0323

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

APPROVED BY SUPERVISOR, DISTRICT II TITLE DATE MAY 31 1990

CONDITIONS OF APPROVAL, IF ANY: