

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

458

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 Mex. 87504-2088

WELL API NO.	30-015-26707
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 ☐	7. Lease Name or Unit Agreement Name Harroun
2. Name of Operator Hallwood Petroleum, Inc.	8. Well No. 1
3. Address of Operator P. O. Box 378111, Denver, CO 80237	9. Pool name or Wildcat Malaga Delaware
4. Well Location Unit Letter <u>0</u> : <u>787</u> Feet From The <u>South</u> Line and <u>2530</u> Feet From The <u>East</u> Line Section <u>7</u> Township <u>24S</u> Range <u>29E</u> NMPM <u>Eddy</u> County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 2946' GL, 2956' KB	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	COMMENCE DRILLING OPNS. ☐
PULL OR ALTER CASING ☐	CASING TEST AND CEMENT JOB ☒
OTHER: ☐	OTHER: ☐
PLUG AND ABANDON ☐	ALTERING CASING ☐
CHANGE PLANS ☐	PLUG AND ABANDONMENT ☐

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.

4/25/91 - 4/26/91

1. Drld 12-1/4" surf hole to 440'.
2. RIH with 10 jts 8-5/8" J-55 24# casing.
3. Cmt with 390 sx Class "C" with 2% CaCl. Circ to surf.
4. WOC 18-1/4 hrs.

4/30/91

5. Drld to TD at 3200'. Log and DST well.

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

SIGNATURE Holly S. Richardson TITLE Sr. Ops. Eng. Tech. DATE 5/20/91
TYPE OR PRINT NAME Holly S. Richardson TELEPHONE NO. 303-850-5322

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT I

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

NOV 21 1991