

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

AUG 07 1991

O. C. D.
ARTESIA, OFFICE

WELL API NO. 30-015-26752
5. Indicate Type of Lease STATE ☐ FEE ☒
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Pardue Martin
8. Well No. 1
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 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
810 South Cincinnati, Suite 110, Tulsa OK 74119

4. Well Location
Unit Letter M : 330 Feet From The South Line and 330 Feet From The West Line

Section 2 Township 23-S Range 28-E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
2992.5' GR

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 ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: ☐	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.

7-31-91 TD 7 7/8" hole @ 6350'. TOH for logs.

8-1-91 By Schlumberger, ran open-hole porosity and resistivity logs.

8-2-91 Ran 5 1/2", 15.5# J-55 LTC csg. @ 0-6350'. By Dowell, cemented first stage w/ 265 sxs. Poz/c, tailed w/ 150 sxs. "C". Opened DV tool @ 3984', circ. 129 sxs. Cemented second stage w/ 740 sxs. Poz/C, tailed w/ 100 sxs. "C". Circ. 118 sxs. to pit.

WOC. Cut csg. RD Grace rig.

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 8-5-91

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

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

APPROVED BY _____ TITLE _____ DATE AUG 7 1991

CONDITIONS OF APPROVAL, IF ANY: