

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

SEP 23 1992

O. C. D.

WELL API NO.

30-015-27045

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Little Pecos Valley

8. Well No.

1

9. Pool name or Wildcat

Undesignated Delaware

1. Type of Well:

OIL  
WELL ☒

GAS  
WELL ☐

OTHER

2. Name of Operator

Collins & Ware, Inc. ✓

3. Address of Operator

303 W. Wall, Suite 2200, Midland, Texas 79701

4. Well Location

Unit Letter D : 550 Feet From The North Line and 990 Feet From The West Line

Section 7

Township 24-S

Range 29-E

NMPM

Eddy

County

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

2970' 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: ☒

Continue Completion

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.

1. Kill well; pull tubing and run a RBP, set at 6,280' KB.
2. Perforate 6,148' to 6,172' KB (one/ft.)
3. Acidize with 3000 gallons of 7.5% NeFe; swab to test.
4. Fracture treat perforations; flow/swab to test.
5. Kill well; pull RBP and combine zones.
6. Install surface equipment.
7. Run potential test and initiate production.

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

SIGNATURE: Sheryl L. Jonas

TITLE

Agent for Collins & Ware, Inc. DATE 9/18/92

TYPE OR PRINT NAME

Sheryl L. Jonas

TELEPHONE NO. (915) 683-5511

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

SUPERVISOR, DISTRICT II

APPROVED BY

Page No. 1

DATE

CONDITIONS OF APPROVAL, IF ANY:

SEP 28 1992