Submit 3 Copies to Appropriate District Office

## State of New Mexico Energy, Minerals and Natural Resources Department

| C                            | [2]_ |
|------------------------------|------|
| Form C-103<br>Revised 1-1-89 | h    |

| DISTRICT I<br>P.O. Box 1980, Hobbs, NM 88240   | OIL CONSERVATION DIVISION P.O. Box 2088 Santa Fe, New Mexico 87504-2088 |                                      | WELL API NO.<br>30-015-27072                             |  |
|--|---|--------------------------------------|--|--|
| DISTRICT II<br>P.O. Drawer DD, Artesia, NM 88210   |   |                                      | 5. Indicate Type of Lease  STATE FEE                     |  |
| DISTRICT III<br>1000 Rio Brazos Rd., Aziec, NM 87410   |   |                                      | 6. State Oil & Gas Lease No. V-3479                      |  |
| SUNDRY NOTI  | CES AND REPORTS ON WELL   | S                                    |  |  |
| ( 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.) |   | 7. Lease Name or Unit Agreement Name |  |  |
| 1. Type of Well:   |   |                                      | Pinnacle State   |  |
| WELL X WELL  | OTHER   | ·                                    |  |  |
| 2. Name of Operator  |   | • •                                  | 8. Weil No.  |  |
| Fortson Oil Company  |   | ·                                    |  |  |
| 3. Address of Operator 3325 W. Wadley, Ste 2   | 13, Midland, TX 79707   | (915) 520-434                        | 9. Pool name or Wildcat<br>Herradura Bend, East Delaware |  |
| 4. Well Location   |   | •                                    |  |  |
| Unit Letter K : 19   | 80 Feet From The South  | Line and1650                         | Feet From The West Line                                  |  |
| Section 36   | Township 22South Ran  |                                      | NMPM Eddy County   |  |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3102'   |   |                                      |  |  |
| 11. Check  | Appropriate Box to Indicate N   | Nature of Notice, R                  | leport, or Other Data                                    |  |
|  |   |                                      | SSEQUENT REPORT OF:                                      |  |
| PERFORM REMEDIAL WORK  | PLUG AND ABANDON  | REMEDIAL WORK                        | ALTERING CASING  |  |
| TEMPORARILY ABANDON  | CHANGE PLANS  | COMMENCE DRILLIN                     | G OPNS. PLUG AND ABANDONMENT                             |  |
| PULL OR ALTER CASING   |   | CASING TEST AND CEMENT JOB           |  |  |
| OTHER: R/C &refrac   |   | OTHER:                               |  |  |
| 12. Describe Proposed or Completed Ope<br>work) SEE RULE 1103.   | rations (Clearly state all pertinent details, an                        | nd give pertinent dates, incl        | luding estimated date of starting any proposed           |  |

See attached recompletion schedule

|                               | <u> </u>   |            |               |
|-------------------------------|------------|------------|---------------|
|                               | Production | Technician | 11/30/93      |
| TYPE OR PRINT YAME JUDY DIXON | (915)      | 520-4347   | TELEPHONE NO. |
|                               |            |            |               |