

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

2040 Pacheco St.  
Santa Fe, NM 87505

WELL API NO. 30-015-05866
Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
State Oil & Gas Lease No. LC 064756
Lease Name or Unit Agreement Name R. T. Wilson Federal
Well No. 3
Pool name or Wildcat Mason Delaware North

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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.)	
Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
Name of Operator AGHORN OPERATING, INC.	
Address of Operator P. O. Box 12663 Odessa, TX 79768	
Well Location Unit Letter <u>H</u> : <u>1984</u> Feet From The <u>N</u> Line and <u>660</u> Feet From The <u>E</u> Line <u>24</u> Section <u>26S</u> Township <u>31E</u> Range <u>NMPM</u> <u>Eddy</u> County	
Elevation (Show whether DF, RKB, RT, GR, etc.) <u>330</u>	

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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: Return to Production ☒

### SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ANBANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER: ☐

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.

Well has been shut-in pending approval to convert to WIW.

Return well to production.

1. Install electric motor and panel.
2. Turn well to battery.

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

SIGNATURE Frosty Gilliam Jr. TITLE President DATE 02-07-02  
TYPE OR PRINT NAME Frosty Gilliam Jr. TELEPHONE NO. 915-550-0804

(This space for State Use)

APPROVED BY [Signature] TITLE [Signature] DATE FEB 8 2002

CONDITIONS OF APPROVAL, IF ANY: