

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Department of Natural Resources

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

DISTRICT I
P. O. Box 1980, Hobbs, NM 88240
DISTRICT II
811 S. First St., Artesia, NM 88210-2834
DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

2040 S. Pacheco
Santa Fe, New Mexico 87505

WELL API NO.
30-015-25164

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 ☐ GAS ☐
WELL ☐ WELL X ☒ OTHER ☐

2. Name of Operator
Hallwood Petroleum, Inc.

3. Address of Operator
P. O. Box 378111, Denver, CO 80237

7. Lease Name or Unit Agreement Name
Salt Draw 2 Com

8. Well No.
1

9. Pool name or Wildcat
~~Vaca Draw~~ Salt Draw 2 Com

4. Well Location
Unit Letter E : 1980 Feet From The North Line and 660 Feet From The West Line
Section 2 Township 25S Range 28E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RI, GR, etc.)
2989.9' 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: Reperf & install coil tubing ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ 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.

Hallwood plans to reperf the Atoka zone (12,057-12,079') believing this well is "loading up" and plans to install 1 1/4" coiled tubing to improve the production and profitability. We plan on doing this work 11/1/96.

Please see attached for procedures.

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

SIGNATURE Nonya K. Durham TITLE Production Reporting Supervisor DATE 10/29/96

TYPE OR PRINT NAME Nonya K. Durham TELEPHONE NO. 303-850-6257
(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY TIM W. GUM TITLE DISTRICT II SUPERVISOR DATE NOV 4 1996

CONDITIONS OF APPROVAL, IF ANY: