

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
En., Minerals and Natural Resources Department

DEC 15 1993

Form C-103
Revised 1-1-89

C/SF
Open.

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

WELL API NO.	30-015-27398
5. Indicate Type of Lease	STATE ☒ FEE ☐
6. State Oil & Gas Lease No.	LH - 2460
7. Lease Name or Unit Agreement Name	Pogo 36 State
8. Well No.	1
9. Pool name or Wildcat	North Brushy Draw - 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 SWD Well	
2. Name of Operator Southwest Royalties, Inc.	
3. Address of Operator P.O. Box 11390, Midland, Texas 79702	
4. Well Location Unit Letter L : 2310 Feet From The South Line and 330 Feet From The West Line Section 36 Township 25-S Range 29-E NMPM Eddy County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3037.5' 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: Convert to SWD ☒	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.

TO AMEND PROPOSAL OF 12-10-93:

- (1). Plan to perforate zone only from 4715' - 4826'.
- (2). Acidize with 2500 gals. 7-1/2% NEFE acid.
- (3). Run lok-set packer on 2-7/8" plastic-coating tubing and set at 4650'.
- (4). Pressure test annulus as per NMOC requirements.

NOTE: If upper intervals of 4176' - 4228' and 4242' - 4270' are ever to be perforated, we will shoot holes at 3950' and squeeze to insure TOC above 3676'.

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

SIGNATURE Ann E. Ritchie TITLE Regulatory Agent DATE 10-13-93
TYPE OR PRINT NAME Ann E. Ritchie (915) TELEPHONE NO. 684-6381

(This space for State Use)

APPROVED BY Ann E. Ritchie TITLE Regulatory Agent DATE 10-13-93
CONDITIONS OF APPROVAL, IF ANY: