| Submit 3 Copies to Appropriate District Office |
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State of New Mexico Energy, Minerals and Natural Resources Department

| Form (| C-103 |
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| Revise | d 1-1-89 |

DISTRICT I P.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

OIL CONSERVATION DIVISION

WELL API NO. P.O. Box 2088 /30-045-27764 Santa Fe, New Mexico 87504-2088

5. Indicate Type of Lease STATE X FEE

| 1000 Rio Brazos Rd., Aztec, NM 87410 | 6. State Oil & Gas Lease No. E-6597-2 | | | | |
|--|---|--|--|--|--|
| 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.) | 7. Lease Name or Unit Agreement Name | | | | |
| 1. Type of Well: OIL GAS WELL X OTHER | Bisti Coal 16 | | | | |
| 2. Name of Operator Giant Exploration & Production Company | 8. Well No. | | | | |
| 3. Address of Operator P.O. Box 2810, Farmington, New Mexico 87499 | 9. Pool name or Wildcat Basin Fruitland Coal | | | | |
| 4. Well Location Unit Letter K: 1980 Feet From The South Line and 1850 | Feet From The West Line | | | | |
| | NMPM San Juan County | | | | |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 6270 GLE | | | | | |
| 11. Check Appropriate Box to Indicate Nature of Notice, R | - | | | | |
| NOTICE OF INTENTION TO: | 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 C | EMENT JOB | | | | |
| OTHER: OTHER: Acidizi | ing X | | | | |
| 12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, incl. work) SEE RULE 1103. | uding estimated date of starting any proposed | | | | |

Acidized wells existing perforations (1082' - 1101') with 500 gallons 15% HCl and returned well to production. 6/14/94

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|-------------------------------|--|-------------|-------------------------------------|--|------------|-----|-----|------|
| I hereby certify that the int | formation above is true and complete to the best of my knowledge | and belief. | | en e | **** | | | |
| SIONATURE | Diguy & Mi Das | TILE | Area Engineer | DATE OCT | <u>. 1</u> | 199 | 34 | |
| TYPE OR PRINT NAME | Gregory E. McIntosh | | | TELEPHONE NO | .50 | 5-3 | 26- | 3325 |
| (This space for State Use) | 01 400 | Ü | reputy oil & gas inspector, dist. # | ia uc. | | 'n | A · | 100# |

CONDITIONS OF APPROVAL, IF ANY:

DATE UUI 2 4 1994