Form C-103 State of New Mexico Submit 3 Copies **Energy, Minerals and Natural Resources Department** Revised 1-1-89 to Appropriate WELL API NO. District Office **OIL CONSERVATION DIVISION** 30-045-28857 DISTRICT 1 5. Indicate Type of Lease P. O. Box 2088 P.O. Drawer 1980, Hobbs, NM 88240 Santa Fe, New Mexico 87504-2088 DISTRICT II FEE X STATE P. O. Drawer DD, Artesia, NM 88210 6. State Oil & Gas Lease No. DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 **SUNDRY NOTICES AND REPORTS ON WELLS** (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) **BRIMHALL 30-11-18** 1. Type of Well: OIL OTHER WELL X WELL 8. Well No. 2. Name of Operator SG INTERESTS I, LTD. 9. Pool Name or Wildcat 3. Address of Operator **BASIN FRUITLAND COAL** P. O. BOX 421, BLANCO, NM 87412-0421 4. Well Location 895 Feet From The Line NORTH Line and Feet From The Unit Letter **SAN JUAN** County NMPM 30N Range Section Township 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 5564' GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. SUBSEQUENT REPORT OF: **NOTICE OF INTENTION TO:** ALTERING CASING PLUG AND ABANDONMENT REMEDIAL WORK PERFORM REMEDIAL WORK PLUG AND ABANDONMENT COMMENCE DRILLING OPNS. CHANGE PLANS TEMPORARILY ABANDONMENT CASING TEST AND CEMENT JOB **PULL OR ALTER CASING** INITIAL POTENTIAL/Ist DELIVERY OTHER 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. **INITIAL POTENTIAL TEST:** 4/30/93 DATE OF TEST: **ACTUAL PRODUCTION TEST - MCF/D:** 178 MCFPD

24 HOURS LENGTH OF TEST: 0 BCPD BBLS. CONDENSATE/MMCF: **GRAVITY OF CONDENSATE: BBLS OF WATER: 19 BWPD CHOKE NIPPLE TESTING METHOD (pilot, back pr.): FLOWING TUBING PRESSURE:** 445 psi

445 psi **FLOWING CASING PRESSURE** SHUT-IN TUBING PRESSURE 335 psi

	SHUT-IN CASING PRESSURE CHOKE SIZE: WELL STATUS:	605 psi 1.25" PRODUCING - 1st DELIVERY 4/30/93			
hereby certify that the	e information above is true and complete to the	he best of my knowledge and belief,			•
SIGNATURE	Garrie a. Base	TITLE AGENT	DATE_	5/04/93	
TYPE OR PRINT NA	ME CARRIE A. BAZE		TELEPHONE	(915) 694-6107	
(This space for State U	(se)				
APPROVED BY Crigi n	al Signed by FRANK T. CHAVER	TITLE SUPERVISOR DISTRICT	# 3 DATE	MAY 06	1993

CONDITIONS OF APPROVAL, IF ANY: