

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

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

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.

30-045-28894

5. Indicate Type of Lease

STATE ☐

FEED ☒

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
WELL ☐

GAS
WELL ☒

OTHER

2. Name of Operator

Hallwood Petroleum, Inc.

3. Address of Operator

P. O. Box 378111, Denver, Colorado 80237

8. Well No.

8

9. Pool name or Wildcat

Basin Fruitland

4. Well Location

Unit Letter K : 1530 Feet From The South Line and 1472 Feet From The West Line

Section 32

Township 30N

Range 12W

NMPM

San Juan

County

10. Elevation (Show whether LF, RKB, RT, GR, etc.)

5408' GL & 5421' KB

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: Perforate & frac. ☐

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 Petroleum, Inc. plans to perform remedial work on the subject well consisting of:

- 1) ND tree, NU BOP's, pull rods and tubing
- 2) Perforate Basal Fruitland Coal at 1415-1458' with 8 SPF.
- 3) Fracture stimulate 1415-1458' with approximately 150,000# of sand in a water base gelled frac fluid
- 4) Put well back on pump and return to production.

RECEIVED
OCT 15 1993

OIL CON. DIV
DIST. 3

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

SIGNATURE Eva Kardas

TITLE Production Technician

DATE 10/11/93

TYPE OR PRINT NAME Eva Kardas

(303) TELEPHONE NO. 850-6282

(This space for State Use)

APPROVED BY Original Signed by CHARLES GHOLSON

TITLE DEPUTY DISTRICT INSPECTOR, DIST. 3

DATE 10/11/93

CONDITIONS OF APPROVAL, IF ANY: