

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

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

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

RECEIVED
91 DEC 23 AM 10 02

WELL API NO.

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

B-4109

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

HOVER STATE

Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

Name of Operator

KERSEY AND COMPANY

8. Well No.

12

Address of Operator

808 Grand, Artesia, NM 88210

9. Pool name or Wildcat

Maljamar Gryburg San Andres

Well Location

Unit Letter A : 660 Feet From The North Line and 660 Feet From The East Line

Section 32 Township 17S Range 32E NMPM LEA County

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

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 ☐

WELL OR ALTER CASING ☐

OTHER: ☐

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.

Due to casing problems, we have temporarily abandoned this well effective November 1, 1991. Will report later when remedial work is scheduled.

RECEIVED THE
OIL CONSERVATION DIVISION
DISTRICT I
HOBBS, NM 88240
DATE 12758
BY
HOBBS, NM
OCD
3/26/02

T.A. Approved for 6 mo

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

SIGNATURE James Kersey TITLE Operator/partner DATE 12-1-91

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

APPROVED BY James Kersey

TITLE

DISTRICT I SUPERVISOR

DATE

DEC 19 1991

CONDITIONS OF APPROVAL, IF ANY: