

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. 30-015-22625
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. L6654
7. Lease Name or Unit Agreement Name State 19 Com
8. Well No. 2
9. Pool name or Wildcat Millman South

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 ☐	10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3493 GL
2. Name of Operator V-F Petroleum Inc.	
3. Address of Operator P.O. Box 1889 Midland, Tx 79702	
4. Well Location Unit Letter N : 860 Feet From The S Line and 2057 Feet From The W Line Section 19 Township 19-S Range 28-E NMPM Eddy County	

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: ☐	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.

5/25/01 MIRU Workover rig. Dump bail 4 sxs cmt. on top of plug @ 10,502'. Perf strawn 9,692-9,698' & 9,643-9,650' 2 spf (28 holes). TIH w/pkr and tbq. Set pkr @ 9,480'.
6/14/01 Acidize down tbq. w/ 750 gals 7 1/2% NEFE acid.
6/15/01 Reacidize down tbq. w/ 1,000 gals 7 1/2% NEFE acid. Swabbed tight. Move pkr up hole 150'. Add additional perfs 9,411-9,428' 4 spf through tbq.
6/20/01 Acidize down tbq. w/ 2,000 gals 7 1/2% NEFE acid w/100 ball sealers. Swab 319 bw w/slight show of gas. Ran temperature log. Log indicates communication from top perf up to 9,340'.
6/23/01 RDMO Workover rig.

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

SIGNATURE S.K. Lawlis TITLE Vice President DATE 09/14/01

TYPE OR PRINT NAME S.K. Lawlis TELEPHONE NO. 915-683-3344

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

Record