

District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Ave., Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
May 27, 2004

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.)		WELL API NO. 30-015-34139
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Nadel and Gussman Permian, LLC.		6. State Oil & Gas Lease No.
3. Address of Operator 601 N. Marienfeld Suite 508 Midland, TX 79701		7. Lease Name or Unit Agreement Name Dinero "16" State
4. Well Location Unit Letter <u>N</u> : <u>1,310'</u> feet from the <u>South</u> line and <u>1,980'</u> feet from the <u>West</u> line Section <u>16</u> Township <u>22S</u> Range <u>28E</u> NMPM Eddy County		8. Well Number # <u>4</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc.) <u>3,083'</u>		9. OGRID Number 155615
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		10. Pool name or Wildcat Wildcat Granite
Pit type <u>Reserve</u> Depth to Groundwater <u>100'</u> + Distance from nearest fresh water well <u>1,000'</u> Distance from nearest surface water <u>1,000'</u>		
Pit Liner Thickness: <u>12</u> mil Below-Grade Tank: Volume <u> </u> bbls Construction Material <u> </u>		

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input checked="" type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

06/17/05 R/U casing crew, held safety meeting and run 7 jts. 13 3/8" 48# H-40 set @ 301'. R/U and cement w/ Lead w/ 150 sx 35/65 poz/c + 6% D20 + 3% S-1 + 1/4# KKD29 + 0.2%D46 Tail w/ 200 sx C + 2%S1 + 1/4#KKD29 Plug down @ 3:00pm 06/17/05 Circ. 113 sx to pits. Cut off conductor & 13 3/8" casing and weld on test head @ 500psi OK. N/U BOP and change rams. Wait on Cement for 18hrs.

06/18/05 N/U BOP and test @ 250 psi low and 1,500 psi high OK. P/U and R/U BHA and TIH Test casing, pipe rams, and annular @ 1,500 psi for 30 mins OK.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☒, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE [Signature] TITLE Staff Engineer DATE 06/27/05

Type or print name E-mail address: Telephone No.

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FOR RECORDS ONLY

APPROVED BY: TITLE DATE JUL 03 2005

Conditions of Approval (if any):