Submit 3 Copies To Appropriate District	State of New	Mexico		Form C-103
Office District I	Energy, Minerals and Natural Resources		May 27, 2004	
1625 N. French Dr., Hobbs, NM 88240			WELL API NO.	
District II	OIL CONSERVATION DIVISION		30-005-63679	
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Francis Dr.		5. Indicate Type of Lease	
1000 Rio Brazos Rd., Aztec, NM 87410			STATE 🖂	FEE
District IV	Santa Fe, NN	18/303	6. State Oil & Gas Lea	ise No.
1220 S. St. Francis Dr., Santa Fe, NM 87505				
	TICES AND REPORTS ON WE	LLS	7. Lease Name or Unit	Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			7. Lease Name of Om	. 7 Igreement I vanie
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH			Barracuda State Unit	
PROPOSALS.)			8. Well Number	
1. Type of Well: Oil Well Gas Well Other			1	
2. Name of Operator	ACCEPTANCE OF THE PARTY OF THE	RECEIVED	9. OGRID Number	
		025575		
3 Address of Operator SLI 2 2003		10. Pool name or Wildcat		
105 S. 4 th Street, Artesia,	NM 88210	BBBINATEBIN	Foor Ranch P	
4. Well Location				
Unit Letter H :	1680 feet from the	North line and	800 feet from the	East line
-				
Section 5	Township 10S	Range 27E	NMPM Chaves	County
11. Elevation (Show whether DR, RKB, RT, GR, etc.)				
Pit or Below-grade Tank Application		934'GR		
				İ
Pit type Depth to Groundwate	er Distance from nearest fro	esh water well Dist	tance from nearest surface w	ater
Pit Liner Thickness: mil	Below-Grade Tank: Volume	bbls; Co	nstruction Material	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data				
NOTICE OF IN	ATTION TO:	l cup	CECUENT DEDO	OT OF.
	NTENTION TO:		SEQUENT REPOR	
PERFORM REMEDIAL WORK		REMEDIAL WORL		ERING CASING
TEMPORARILY ABANDON	· · · · · · · · · · · · · · · · · · ·	COMMENCE DRI		G AND ABANDON 🗌
PULL OR ALTER CASING	MULTIPLE COMPL	CASING/CEMENT	「JOB □	
OTHER:		OTHER: Plugbac	k and recomplete	\boxtimes
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.				
•				
8/9/05 – Loaded backside, would no				
8/10/05 – Tested in hole with AS1 10K packer and 2-7/8" tubing. Found 1 bad joint and 1 loose collar. Set packer at 6350'.				
8/12/05 – Load tubing. Unset packer and POH.				
8/15/05 - Set composite BP at 6400'. Perforate Wolfcamp 5574'-5592' (38), 5668'-5674' (14) and 5944'-5958' (30).				
8/16/05 - Acidize Wolfcamp 5944'-5958' with 1500g 20% IC acid and 45 balls.				
8/18/05 – Acidize Wolfcamp 5668'-5674' with 600g 20% IC acid with 21 balls.				
8/19/05 – Acidize Wolfcamp 5574'-5592' with 1800g 20% IC acid and 57 balls. Set AS1 10K packer with 2.25" on/off tool at 5510'.				
D 1.1				
Recompletion unsuccessful, cont	inuing evaluation of well.			
I hereby cortify that the information	above is two and complete to t	h a h a st a C 1 1 - d		
I hereby certify that the information grade tank has been/will be constructed or	raclosed according to NMOCD guidel	ine dest of my knowledge ines \square , a general permit \square	e and Dellel. I turther cert or an (attached) alternative (ify that any pit or below-
1	1			oon-approved high □.
SIGNATURE June	TITLE Regu	latory Compliance Supe	rvisor DATE Set	otember 1, 2005
1				
Type or print name Tina Hue	rta E-mail addre	ess: <u>tinah@ypcnm.co</u>	m Telephone No	o. <u>505-748-1471</u>
For State Use Only			4	SED A 4 soor
APPROVED BY: FOR	RECORDS ONLY TITL	E	DA	SEP 0 4 2005 TE

Conditions of Approval (if any):