

Submit 3 Copies To Appropriate District Office
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

WELL API NO. **30-015-34831**

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
K-4538

7. Lease Name or Unit Agreement Name
Saragossa 10 State

8. Well Number
3

9. OGRID Number
018917

10. Pool name or Wildcat
Happy Valley Delaware

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
Read & Stevens, Inc.

3. Address of Operator
P. O. Box 1518 Roswell, NM 88202

4. Well Location
Unit Letter **A** : **330** feet from the **North** line and **990** feet from the **East** line
Section: **10** Township **23S** Range **26E** NMPM County **Eddy**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3,292' GR

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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

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

06/14/06 Spud well @ 12:00 AM 6/14/06. Drill 12 1/4" hole to 670'. Ran 16 jts 8 5/8" 24# J-55 ST&C csg, set @ 670'. Cmt w/ 145 sx of lead Premium Plus, tailed w/ 200 sx Premium Plus plus 2% CaCl. Circ 100 sx to pit. Tested BOP & csg 1000 psi-OK. WOC 24 hrs.

06/19/06 Drill 7 7/8" hole to 3,200'. Ran 80 jts 5 1/2" 15.5# J-55 ST&C csg, set @ 3,165'. Cmt w/ 195 sx of Light Premium Plus w/ additives, tail in w/ 200 sx Premium Plus w/ additives. Did not circulate cmt. Rig released @ 3:00 AM 6/10/06.

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 John C. Maxey TITLE **Operations Manager** DATE **7-27-06**

Type or print name
For State Use Only

E-mail address: **read@lookingglass.net** Telephone No. **505/622-3770**

APPROVED BY: Jim W. Green TITLE **District II Supervisor** DATE **8/2/06**

Conditions of Approval (if any):