		, ,		
Submit 3 Copies To Appropriate District Office	State of New Me	exico		Form C-103
District I	Energy, Minerals and Natu	ral Resources	WELL API NO.	May 27, 2004
625 N. French Dr., Hobbs, NM 88240 District II	OH CONGERNATION	DIVIO	30-005-63037	
301 W. Grand Ave., Artesia, NM 88210 District III	OIL CONSERVATION DIVISION 1220 South St. Francis Dr.		5. Indicate Type of Lease	
000 Rio Brazos Rd., Aztec, NM 87410	Santa Fe, NM 87	20000000		EE
<u>District IV</u> 220 S. St. Francis Dr., Santa Fe, NM 87505	Santa PC, INIVI 67	303	.6. State Oil & Gas Lease V-2982	No.
	CES AND REPORTS ON WELLS		7. Lease Name or Unit Ag	greement Name
DO NOT USE THIS FORM FOR PROPOSALS DIFFERENT RESERVOIR. USE "APPLICATION OF THE USE "APPLICATION OF THE USE "APPLICATION OF THE USE "APPLICATION OF THE USE "APPLICATION".			Outros AMO Otata	
	s Well Other	,	Quincy AMQ State 8. Well Number	
			#5	
. Name of Operator	SEP 26	2008	9. OGRID Number	
lanson Operating Company, Inc. Address of Operator		etteria	009974 10. Pool name or Wildcat	
. O. Box 1515, Roswell, NM 8820)2-1515	7 11 COM [2]	Acme San Andres South	
. Well Location				
Unit Letter E :	1650 feet from the North	line and 990	feet from the Wes	t line
Section 12	Township 8 South Rar		NMPM Chaves	County
	11. Elevation (Show whether DR, I	RKB, RT, GR, etc.)		
or Below-grade Tank Application ⊠ or Clo	3968' GR			
	· <u>>100°</u> Distance from nearest fresh water	well >2 miles Distance	from nearest surface water >10 n	niles
Liner Thickness: 12 mil	Below-Grade Tank: Volume			<u> </u>
12. Check A	appropriate Box to Indicate N			
	••		•	
NOTICE OF INTENTION TO: SUE PERFORM REMEDIAL WORK □ PLUG AND ABANDON ☑ REMEDIAL WORK			BSEQUENT REPORT OF: C	
-	PORARILY ABANDON CHANGE PLANS COMMENCE DRI		 -	
	MULTIPLE COMPL	CASING/CEMENT		
OTHER:		OTHER:		
13. Describe proposed or complete				
recompletion.	SEE RULE 1103. For Multiple Cor	npietions: Attach we		
			IAOUTA OC	D 24 hrs. D
urpose to plug and abandoi	า well as follows:		lo any i	D 24 hrs. p work done.
			•	-··· 401,16.
Set CIBP at 2050' with	•			
	# brine with 12.5# per bar	rei sait water g	el.	ad providing Work
Perforate 4 squeeze h		V to ourfood	in complete by	ed providing work
Pump 100 sacks ceme Clean and remediate I	ent for solid plug from 450	to surface.	12 Combiere n	
Set Dry Hole Marker.	ocation.			
Cot Bry Hole Marker.				
and a sent Apr	proval for Works	se Pit.		
EMIS 13 1100 11/1		•		
K This is not App ontour Pit Raguires	Submission of	C-144		
onkover li regultes	·			
ereby certify that the information abo	ve is true and complete to the best of	of my knowledge and	l belief. I further certify that an	y pit or below-grade
k has been/will be constructed or closed acco	rding to NMOCD guidelines 🗵, a general			
GNATURE CAROL	Smith TITLE Dr.	oduction Analyst	DATE 09/0	9/2008
		Jaaouon Andryjt	DUID 0310	U, _ UUU

SIGNATURE

SIGNATURE

Carol J. Smith

E-mail address: hanson@dfn.com

Title Production Analyst

Title Production Analyst

DATE 09/09/2008

Telephone No. 505-622-7330

Telephone No. 505-622-7330

DATE 9/29/2008

TITLE Production Analyst

Title Production Analyst

DATE 09/09/2008

Telephone No. 505-622-7330

Title Production Analyst

DATE 9/29/2008

DATE 9/29/2008

Title Production Analyst

DATE 9/29/2008

Title Production Analyst

DATE 9/29/2008

Title Production Analyst

DATE 9/29/2008

DATE 9/29/2008

Title Production Analyst

DATE 9/29/2008

Title Production Analyst

DATE 9/29/2008

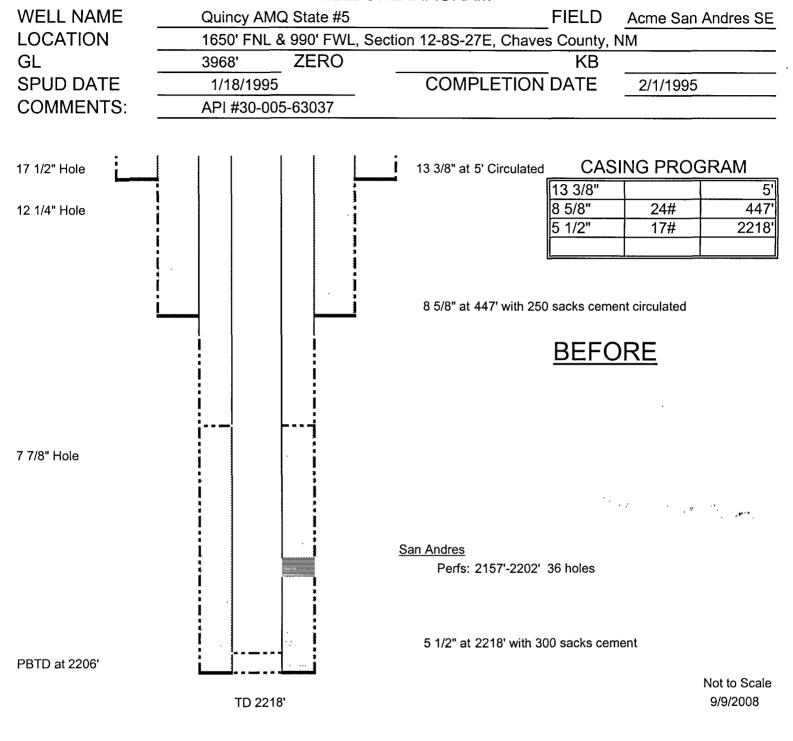
DATE 9/29/2008

Title Production Analyst

DATE 9/29/2008

Title Prod

WELLBORE DIAGRAM



WELLBORE DIAGRAM

