

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION
P.O. Box 2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OCT 17 '89

O. C. D.

WELL API NO.

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

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

N. Dale Nichols

3. Address of Operator

P.O. Box 1972, Midland, Texas 79702

4. Well Location

Unit Letter P : 330 Feet From The South Line and 990 Feet From The East Line

Section 32

Township 7S

Range R 27 E

NMPM

Chaves

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

4017 G.L.

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ 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.

7-27-89

- 1) R.U. Pulling Unit, pulled rods pump and tubing.
- 2) Ran 2 3/8 tubing with Baker AD-1 tension packer set at 1875.
- 3) Acidizing through perfs 1926-32, 1938-58 & 1968-70 with 12,000 gallons Halliburton MOD 202 Acid.
- 4) Flowed and swabbed well to recovered load.
- 5) No increase in production, return to production.

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

SIGNATURE N. Dale Nichols

TITLE Operator

DATE 10-16-89
915

TYPE OR PRINT NAME: N. Dale Nichols

TELEPHONE NO. 682-5621

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

APPROVED BY _____ TITLE _____

DATE

OCT 20 1989

CONDITIONS OF APPROVAL, IF ANY: