

CISF  
Op

# OIL CONSERVATION DIVISION

2040 S. Pacheco  
Santa Fe, New Mexico 87505

## DISTRICT I

P. O. Box 1980, Hobbs, NM 88241-1980

## DISTRICT II

811 S. First, Artesia, NM 88210

## DISTRICT III

1000 Rio Brazos Rd, Aztec, NM 87410

|   |  |
|---|--|
| WELL API NO.<br><b>30-005-00422</b>   |  |
| 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |  |
| 6. State Oil & Gas Lease No.  |  |
| 7. Lease Name or Unit Agreement Name<br><b>WHITE RANCH</b>  |  |
| 8. Well No.<br><b>3</b>   |  |
| 9. Pool name or wildcat<br><b>WHITE RANCH MISSISSIPPIAN, (GAS)</b>                                  |  |

|  |  |
|--|--|
| <b>SUNDRY NOTICES AND REPORTS ON WELLS</b><br>(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:<br>OIL <input type="checkbox"/> GAS <input checked="" type="checkbox"/><br>WELL <input type="checkbox"/> WELL <input type="checkbox"/> OTHER <input type="checkbox"/>   |  |
| 2. Name of Operator<br><b>C. W. TRAINER</b>  |  |
| 3. Address of Operator<br><b>c/o OIL REPORTS &amp; GAS SERVICES, INC., 1008 W. BROADWAY, HOBBS, NM 88240</b>   |  |
| 4. Well Location<br>Unit Letter <b>M</b> : <b>990</b> Feet From The <b>SOUTH</b> Line and <b>660</b> Feet From The <b>WEST</b> Line<br>Section <b>34</b> Township <b>11S</b> Range <b>29E</b> NMPM <b>CHAVES</b> County<br>10. Elevation (Show whether DF, RKB, RT, GR, ect.)<br><b>3778' GR</b> |  |

11. 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 checked="" 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"/>  | PLUG & ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/>  |  | CASING TEST & CEMENT JOB <input type="checkbox"/> |   |
| OTHER: <input type="checkbox"/>                |  | OTHER: <input type="checkbox"/>                   |   |

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.

IT IS INTENDED TO PLUG THIS WELL. AS FOLLOWS:

SET CIBP @ 8643' W/35' CMT ON TOP, CIRC BRINE GEL TO SURF. RUN FREEPOINT, CUT & PULL 5 1/2" CSG. 6700'+.

SPOT 25 SX CMT PLUG 50' IN & 50' OUT 5 1/2" CSG STUB & TAG.

SPOT 25 SX CMT PLUG 6750'-6650'.

SPOT 25 SX CMT PLUG 5742'-5642'.

SPOT 25 SX CMT PLUG 3399'-3299'.

SPOT 30 SX CMT PLUG 2196'-2096' & TAG.

SPOT 10 SX PLUG TO SURF.



\* Notify N.M.O.C.D. to witness plugging operations.  
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Gaye Heard TITLE AGENT DATE 09/12/2000

TYPE OR PRINT NAME GAYE HEARD TELEPHONE NO. (505) 393-2727

(THIS SPACE FOR STATE USE)

APPROVED BY Mrs. S. Whitefield TITLE Field Rep # DATE 9/18/2000

CONDITIONS APPROVAL, IF ANY: