

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

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

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

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

RECEIVED
OCT 11 1993

WELL API NO.	30-005-61007
5. Indicate Type of Lease	STATE ☐ FEE ☒
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	Twin Lakes San Andres Unit
8. Well No.	68
9. Pool name or Wildcat	TLSA Assoc.
10. Elevation (Show whether D.F., RKB, RT, GR, etc.)	3995' GR

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 ☒ Injection

2. Name of Operator
Energy Development Corporation

3. Address of Operator
1000 Louisiana, Suite 2900, Houston, TX 77002

4. Well Location
Unit Letter E : 1650. Feet From The North Line and 330 Feet From The West Line

Section 6 Township 9S Range 29E NMPM Chaves County

10. Elevation (Show whether D.F., RKB, RT, GR, etc.)
3995' GR

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.

8/9/93: RU Jarrel Services, RIH w/1 3/4" Bailer. Hit obstruction at 2738'. Couldn't get through perfs.
8/16/93: RU Rev Unit and pulling unit. POOH w/tbg. & pkr. RIH w/3 7/8" bit on 2 7/8" tbg. through bridge at 2738' to PBTD at 2831'. Circulated for 1 hr. POOH. RIH w/R-4 tension pkr. 82 jts. plastic coated 2 3/8" tbg. POOH.
8/17/93: Circulated 50 bbls. corr. inhib water. Set pkr at 2606'. Pressure test csg. to 300 PSI. Witnessed by Gary Williams, NMOCD.

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

SIGNATURE Gene Linton TITLE Supr. Production Acctng. DATE 8/26/93
TYPE OR PRINT NAME Gene Linton TELEPHONE NO. 713/750-7563

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS
SUPERVISOR, DISTRICT II

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

OCT 19 1993