

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

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

DISTRICT III
1000 Rio Grande Rd., Artesia, NM 87410

OIL CONSERVATION DIVISION
310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

WELL API NO. 30-005-61061	
1. Indicate Type of Lease	STATE ☐ FEDERAL ☒
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name Cowboy	
8. Well No. #1	
9. Pool name or Wildcat Wildcat	

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 CIBOLA ENERGY CORPORATION
3. Address of Operator P.O. Box 1608, Albuquerque, NM 87103-1608	4. Well Location Unit Letter <u>D</u> : <u>330</u> Feet From The <u>North</u> Line and <u>330</u> Feet From The <u>West</u> Line Section <u>34</u> Township <u>11 S</u> Range <u>28 E</u> NMPM Chaves County Elevation (Show whether D.F., R.R., RT, C.R. etc) 3655 GL

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☒	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER: ☐	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.

Propose to plug well as follows:

Cut and pull casing-stabilize hole w/ mud laden fluid.
Set 25 sak plug from TD to 7637.
Set 25 sak plug from 7000-7100 at top of Miss.-Tag
Set 25 sak plug from 5440-5540 at top of Wolfcamp.
Set 25 sak plug from 5080-5100 at top of Abo.
Set 40 sak plug from 2327-2427 at base of 8-5/8" csg.- Tag
Set 35 sak plug from 1460-1560 at top of San Andres.
Set 35 sak plug from 355-455 at top of Yates.
Set 10 sak plug at surface with adry hole marker.

* DO DOWN HOLE WORK before cut csg.

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

SIGNATURE Douglas L. Waters TITLE Sr. Geologist DATE 2/1/95
TYPE OR PRINT NAME Douglas L. Waters TELEPHONE NO. (505) 242-2050

(This space for State Use)

APPROVED BY Jan Gunn TITLE District Sup. DATE 1/14/90
CONDITIONS OF APPROVAL, IF ANY: