

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

JUL 26 1982

O. C. D.

ARTESIA, OFFICE

Form C-103
Revised 10-1-78

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5a. Indicate Type of Lease
State ☐ Fee ☒
5. 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.)

OIL WELL ☒	GAS WELL ☐	OTHER ☐
Name of Operator Cibola Energy Corporation		
Address of Operator P.O. Box 1668, Albuquerque, New Mexico 87103		
Location of Well UNIT LETTER <u>J</u> <u>1980</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE, SECTION <u>18</u> TOWNSHIP <u>9S</u> RANGE <u>28E</u> N.M.P.M.		

7. Unit Agreement Name
8. Farm or Lease Name Sardine Can
9. Well No. 1
10. Field and Pool, or Wildcat Wildcat San Andres
12. County Chaves

15. Elevation (Show whether DF, RT, GR, etc.)
3888.9 Gr.

6. 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 ☐			

17. 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.

4-28-82 TD 1355'

Plan to plug well as follows:

1st plug, 40 sacks Class C Cement with 2% CaCl at 1355' to cover penrose at 1234'
2nd plug, 45 sacks Class C Cement with 2% CaCl at 500' to cover Yates and surface casing, tag at 350'.
3rd plug, 15 sacks Class C Cement at surface with dry hole marker.

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

SIGNED Anita Vigil TITLE Drilling Secretary DATE July 20, 1982

APPROVED BY Mike Wilkerson TITLE OIL AND GAS INSPECTOR DATE JUL 29 1982

CONDITIONS OF APPROVAL, IF ANY: