

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

5H
C/SF
OPR.

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

WELL API NO. 30-005-62639
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Mustang
8. Well No. #1
9. Pool name or Wildcat Wildcat - Montoya

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	
2. Name of Operator Fred Pool Drilling, Inc. ✓	
3. Address of Operator P.O. Box 1393, Roswell, NM 88202	
4. Well Location Unit Letter <u>G</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u> Line Section <u>11</u> Township <u>6S</u> Range <u>27E</u> NMPM Chaves County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4056' GR	

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: Perforate and acidize <input checked="" 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.

1/6/89 Set Cement retainer at 6490'. Squeezed perms at 6510 - 6512 with 100 sx class "H" Cement.

1/13/89 Acidized perms at 6424 - 6432 with 500 gal. 15% HCL

1/18/89 Faced perms at 6424 - 6432 with 12,000 cross-linked gel and 10,300 lb. 20/40 sand.

1/24/89 Set CIBP at 6359 with 35 sx cement on top.

1/25/89 Perforated 6200 - 6206 with 1 shot per foot for a total of 7 shots. Acidized with 1000 gal 15% HCL.

1/28/89 Perforated 6078 - 6088. Acidized perms at 6078 - 88 with 1500 gal 15% HCL.

2/1/89 Set CIBP at 6000' with 35' of cement on top.

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

SIGNATURE _____ TITLE Secretary DATE 2/2/89

TYPE OR PRINT NAME Deborah Goluska TELEPHONE NO. 623-8202

(This space for State Use)

Original Signed By
Mike Williams

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

FEB 09 1989