

457
dp

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

DISTRICT II
P.O. Drawer DD, Artesia, NM 88213

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

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

JAN 17 '89

WELL ACCT NO.
30-005-62641

5. Indicate Type of Lease
STATEXX FEE

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name
L.F.R. "30"

8. Well No.
#1

9. Pool name or Wildcat
Wildcat - SA

SUNDY 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
Fred Pool Drilling, Inc.

3. Address of Operator
P.O. Box 1393, Roswell, NM 88202

4. Well Location
Unit Letter I 1980 Feet From The South Line and 330 Feet From The East Line
Section 30 Township 10S Range 29E NMPM Chaves County

10. Elevation (Show whether DF, RKB, RC, GR, etc.)
3853 GR

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 ☐		CASING TEST AND CEMENT JOBS ☐	
OTHER ☐		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 190.

As per verbal instructions from M. Williams on 1/5/89, the referenced well was plugged as follows:

1/5/89

1. Spotted cement plug from 2950 to 2815.
2. Spotted cement plug from 2050 to 1915.
3. Spotted cement plug from 1750 to 1615.
4. Spotted cement plug from 960 to 825.
5. Spotted cement plug from 650 to 515, tagged.
6. Set 10 sx plug at surface.

- Notes:
1. All plugs Class "C". Plug #5 had 4% CaCl.
 2. 10# salt gel mud between plugs.
 3. All plugs 25 sx except surface plug.

Post ID-2
3-12-89
P+A

I hereby certify that the information given is true and complete to the best of my knowledge as indicated.

SIGNATURE *[Signature]* TITLE Secretary DATE 1/16/89

TYPE OF PRINT NAME TELEPHONE NO.

(This space for State Use)

APPROVED BY *Danell Moore* TITLE Geologist DATE 1/1/89

CONSULTING OR ADVISORY IF ANY