

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

APPROVED	DATE	BY

30-005-62680

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.
L-6276

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 ☐ JUN 29 '89

2. Name of Operator
Carl A. Schellinger C. C. D.

3. Address of Operator
Post Office Box 447, Roswell, New Mexico 88202 ARTESIA, OFFICE

7. Lease Name or Unit Agreement Name

Campbell Station Unit

8. Well No.

6

9. Pool name or Wildcat

Und. Four Ranch Penn,N

4. Well Location

Unit Letter I : 1980 Feet From The South Line and 660 Feet From The East Line

Section 5 Township 9 South Range 27 East NMPM Chaves County

10. Elevation (Show whether DP, RKB, RT, GR, etc.)

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.

Montoya production declined to 65 MCFPD + 25 BWPD.
Plan to plug Montoya perfs 6482-6518 and Plug back to perforate the
Pennsylvanian @ 6311,6328,6333, 6336 and 6337;
Acidize with 2000 gal of 15% NeFe and if necessary frac with 20,000 gal
Purgel-30 and 10,000 gal CO₂ with 34000# sand.

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

SIGNATURE

TITLE Operator

DATE 06/26/89

(505)

TYPE OR PRINT NAME

Carl A. Schellinger

TELEPHONE NO. 623-2328

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

APPROVED BY

SUPERVISOR, DISTRICT II

TITLE

DATE

JUL 5 1989

CONDITIONS OF APPROVAL, IF ANY: