

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**  
310 Old Santa Fe Trail, Room 206  
Santa Fe, New Mexico 87503

WELL API NO.

5. Indicate Type of Lease  
STATE ☐ FEE ☒

6. 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.)

1. Type of Well:  
OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator  
Jalapeno Corporation

3. Address of Operator  
P.O. Box 1608, Albuquerque, NM 87103-1608

4. Well Location  
Unit Letter D : 990 Feet From The North Line and 990 Feet From The West Line

Section 31 Township 10 S Range 28 E NMPM Chaves County

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

2710.8 GL

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.

Propose to plug the well as follows:

Set 25 sak plug TD to approximately 2125 to cover Slaughter. - Tag  
Add mud laden fluid to fill hole.

Set 25 sak plug at top San Andres from 1500' to 1600'

Set 25 sak plug at top Queen at 815 to 915.

Set 25 sak plug to cover base of 7" surface pipe from approximately 230' to 330'. - Tag

Set 10 sak plug at surface with dry hole marker

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

SIGNATURE Douglas L. Waters

TITLE Senior Geologist

DATE 1/31/95

TYPE OR PRINT NAME Douglas L. Waters

TELEPHONE NO. (505) 242-2050

(This space for State Use)

**ORIGINAL SIGNED BY TIM W. GUM**  
**DISTRICT II SUPERVISOR**

APPROVED BY

TITLE

DATE

**FEB 10 1995**

CONDITIONS OF APPROVAL, IF ANY: