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to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department **MAR 8 '90**

Form C-103
Revised 1-1-89

CISF
Op

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

ARTESIA, OFFICE

WELL-API NO.

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

LG-7426

7. Lease Name or Unit Agreement Name

McBride State Com

8. Well No.

2

9. Pool name or Wildcat

Diablo Fusselman

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

Stevens Operating Corporation

3. Address of Operator

P. O. Box 2408, Roswell, NM 88202

4. Well Location

Unit Letter B : 660 Feet From The North Line and 2220 Feet From The East Line

Section 28 Township 10S Range 27E NMPM Chaves County

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

3813' GR

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.

March 1, 1990 Frank's Rat Hole drilled 31' with air. Set 31' 14" csg. Cement to surface with Redi-Mix.

Prep to change rigs and drill surface hole using United Drilling Company air rig to avoid loss circulation zone.

Below intermediate string, remainder of hole will be drilled by L & M Drilling.

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

SIGNATURE

TITLE General Manager

DATE 3/5/90

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY
MIKE WILLIAMS

MAR 26 1990

APPROVED BY SUPERVISOR, DISTRICT II TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: