

OIL CONSERVATION DIVISION

2040 South Pacheco
Santa Fe, New Mexico 87505

DISTRICT I

1625 N. French Dr., Hobbs, NM 88240

DISTRICT II

811 S. First Street, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.
30-005-62781

5. Indicate Type of Lease

STATE

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FEE

☐6. State Oil & Gas Lease No.
VA-1952

7. Lease Name or Unit Agreement Name

Sunfish State

8. Well No.

1

9. Pool Name or Wildcat

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

GAS

WELL

☐

WELL

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OTHER

Name of Operator

ELK OIL COMPANY

3. Address of Operator

POST OFFICE BOX 310, ROSWELL, NEW MEXICO 88202-0310

4. Well Location

Unit Letter

J

:

1980

Feet From The

SOUTH

Line and

1980

Feet From The

EAST

Line

Section 32

Township

9 South

Range

27 East

NMPM

CHAVES

County

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

3913' GR

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK

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PLUG AND ABANDON

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TEMPORARILY ABANDON

☐

CHANGE PLANS

☐

PULL OR ALTER CASING

☐

MULTIPLE COMPLETION

☐

OTHER:

☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK

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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 For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Ran 154 Joints (6782') of 5 1/2", 15.5# and 17#, K-55 LTC Casing. Cemented with
12 Barrels Mud Flush ahead, 600 sxs Super H Cement with 4/10% Halad-344, 3# Salt,
4/10% CFR-3 and 5 # Gilsonite. Plug down at 4:45 P.M. on 03/10/01. WOC 18 hours,
Tested 30 minutes, held okay. Prep to perforate and test.

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

SIGNATURE

TITLE

PRESIDENT

DATE

3/19/01

TYPE OR PRINT

NAME

JOSEPH J. KELLY

TELEPHONE NO.

505-623-3190

(This space for State Use)

ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR

APPROVED BY

TITLE

DATE

MAR 22 2001

CONDITIONS OF APPROVAL, IF ANY: