

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

MAR 8 1991

O. C. D.
ARTESIA, OFFICE

WELL API NO.

30-005-62815

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

V-3191

7. Lease Name or Unit Agreement Name

Rickey "A"

8. Well No.

1

9. Pool name or Wildcat

Double L (Queen) Assoc.

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:

CIL
WELL ☒

GAS
WELL ☐

OTHER

2. Name of Operator

Collins Oil & Gas Corporation

3. Address of Operator

P.O. Box 2443, Roswell, NM 88202-2443

4. Well Location

Unit Letter K : 2310 Feet From The South Line and 2310 Feet From The West Line

Section 14

Township 14S

Range 29E

NMPM Chaves

County

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

3750 GL

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data
NOTICE OF INTENTION TO:

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 JOB ☒

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 1103.

2-28-91 T.D. well at 1850'.

3-02-91 Ran 1850' of 4½", J-55, 9.5 lb. casing with guide shoe. Pumped plug with 100 sxs. of Class "C" cement with 2% calcium chloride.

3-05-91 Logged hole with Gamma Ray Neutron Log. Perforated casing with 2 spf at 1805' to 1819'.

3-07-91 Ran 1820' of 2-3/8" tubing to spot acid on bottom perfs.

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

SIGNATURE

Roy D. Collins

TITLE Pres. Collins O/G

DATE 3-7-91

TYPE OR PRINT NAME

ROY D. COLLINS

TELEPHONE NO. 623-2040

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

SUPERVISOR, DISTRICT II

MAR 18 1991

APPROVED BY

SUPERVISOR, DISTRICT II

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: