

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 19 1991

O. C. D.

WELL API NO.

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

V-1467

7. Lease Name or Unit Agreement Name

BONITO STATE UNIT

8. Well No.

2

9. Pool name or Wildcat

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  
WELL ☒

GAS  
WELL ☐

OTHER

2. Name of Operator

R&R RESOURCES (DIV. HONDO PIPE & SUPPLY INC.)

3. Address of Operator

P.O. BOX 787, ROSWELL, N.M. 88202

4. Well Location

Unit Letter i : 660 Feet From The EAST Line and 1980 Feet From The SOUTH Line

Section 5 Township 10S Range 27E NMPM CHAVES County

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

GR 3927

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.

3/17/91

RAN 615' 85/8": 23# CASING: RAN 375 SX CLASS C CEMENT  
W/ 2% CACL2; CIRCULATED 50 SXS: PLUG DOWN 1:30 P.M.  
WOC 12 HOURS. NO SURFACE WATER.

3/18/91

FLANGING UP BOP: 8:00 A.M.

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

SIGNATURE

*Jeffrey A. Roberts*

TITLE

agent

DATE

2/17/91

TYPE OR PRINT NAME

JEFFREY A. ROBERTS

TELEPHONE NO.

623-8845

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

APPROVED BY

SUPERVISOR, DISTRICT I

TITLE

DATE

MAR 21 1991

CONDITIONS OF APPROVAL, IF ANY: