

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

RECEIVED

APR 27 1993

WELL API NO.

30-005-62955

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

V-2982

7. Lease Name or Unit Agreement Name

Bill Thorp State

8. Well No.

1

9. Pool name or Wildcat

Palma Mesa-San Andres

1. Type of Well:

OIL  
WELL ☒

GAS  
WELL ☐

OTHER

2. Name of Operator

Collins Oil & Gas Corporation

3. Address of Operator

P.O. Box 2443, Roswell, NM 88202

4. Well Location

Unit Letter M : 330 Feet From The South Line and 330 Feet From The West Line

Section 12 Township 8-S Range 27E NMPM Chaves County

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

3926 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.

4-22-93 Spudded hole at 8:00 a.m.

4-23-93 Ran 463' of .24 lb., J-55, 8-5/8" casing with insert float and Texas Pattern shoe. Pumped 275 sxs. of Class "C" cement with 2% cacl. circulated approx. 77 sxs. of cement to pits.

4-24-93 Drying time on cement was approx. 20 hrs. Pressure tested casing to 600 lbs. for 30 minutes, no pressure dropage. Drilled out insert and shoe joint, no water below casing. Resumed drilling operations.

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 4-25-93

TYPE OR PRINT NAME ROY D. COLLINS

TELEPHONE NO. 623-2040

(This space for State Use)

ORIGINAL SIGNED BY

MIKE WILLIAMS

SUPERVISOR, DISTRICT II

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_

DATE

APR 28 1993

CONDITIONS OF APPROVAL, IF ANY: