

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 24 1994

WELL API NO.	30-005-63005
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	V-2924
7. Lease Name or Unit Agreement Name	J. Horton State
8. Well No.	1
9. Pool name or Wildcat	SE Acme San-Andres Pool

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
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 <u>P</u> : <u>330</u> Feet From The <u>South</u> Line and <u>330</u> Feet From The <u>East</u> Line

Section 2 Township 8-S Range 27E NMPM Chaves County
10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3955 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: Completion ☐

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.

3-10-94 Logged hole with Compensated Neutron log. Perforated casing with 2 s.p.f. at 2111, 2112, 2121, 2125, 2128, 2129, 2130, 2133, 2134, 2139, 2140, 2143, 2148, 2149, 2151.

3-11-94 Acidized well with 5000 gal. of 20% HCL. Average treating pressure 1800 lbs at 4 bbls. per minute. Swabbed tubing, tripped tubing, & packer. Ran rods, pump, and installed pumping unit. Pumping well to test tank.

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

SIGNATURE Ray E. Collins TITLE Pres. Collins Oil & Gas DATE 3-21-94

TYPE OR PRINT NAME TELEPHONE NO 623-2040

(This space for State Use)

SUPERVISOR, DISTRICT II

APPROVED BY _____ TITLE _____ DATE APR 2 1994

CONDITIONS OF APPROVAL, IF ANY: