

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

WELL API NO.  
30-005-63291

5. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.  
26782

**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  
RELIANCE ENERGY, INC.

3. Address of Operator  
P. O. Box 10946, Midland, Texas 79702

4. Well Location  
Unit Letter J : 1980 Feet From The South Line and 1980 Feet From The East Line  
Section 22 Township 4S Range 25E NMPM Chaves County

7. Lease Name or Unit Agreement Name  
Willow Spring "22" State

8. Well No.  
1

9. Pool name or Wildcat  
Wildcat (Abo)

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3799' GR

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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.

1-06-2001

Ran 46 jts 8-5/8" 24#, K-55, ST&C csg to 1972'  
w/insert float @ 1945'. Cement csg w/400 sxs  
35/65 Poz "C" w/6% gel and 100 sxs Class "C"  
w/2% CaCl. Circ'd 57 sxs to pit. WOC 18 hrs.



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

SIGNATURE Peggy Abernathy TITLE Agent DATE 01-08-2001  
(915)  
TYPE OR PRINT NAME Peggy Abernathy TELEPHONE NO. 683-4816

(This space for State Use)

**ORIGINAL SIGNED BY TIM W. GUM**  
**DISTRICT II SUPERVISOR**

APPROVED BY \_\_\_\_\_ DATE JAN 25 2001

CONDITIONS OF APPROVAL, IF ANY: