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U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State <input type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
Federal LC 287551

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DISTRICT RESERVOIR.
USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)OIL WELL ☒ GAS WELL ☐ OTHER ☐

Name of Operator

Tom R. Minihan

Address of Operator

P.O. Box 4364 Midland, Tex. 79704

Location of Well

UNIT LETTER 0, 990 FEET FROM THE south LINE AND 2310 FEET FROM
THE east LINE, SECTION 35 TOWNSHIP 17S RANGE 27E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)

3609' GL

7. Unit Agreement Name

S R L G Unit

8. Farm or Lease Name

South Red Lake Grayburg

9. Well No.

26

10. Field and Pool, or Wildcat

Red Lake - Grayburg

12. County

Eddy

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐PLUG AND ABANDON ☐
CHANGE PLANS ☐
OTHER ☐REMEDIAL WORK ☒
COMMENCE DRILLING OPS. ☐
CASING TEST AND CEMENT JOBS ☐
OTHER ☐ALTERING CASING ☐
PLUG AND ABANDONMENT ☐
OTHER ☐

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.

Clean out and sand frac present producing zone. Start August 2, 1982.

Procedure:

1. Pull rods and tubing, install BOP.
2. Clean out to 1624" - Run G.R. - Neutron log.
3. Pick up 6 5/8 x 2 7/8 tubing packer on 2 7/8 tubing.
4. Set packer load and shut in annulars with 500#.
5. Treat down 2 7/8 tubing under the packer with 10,000 gals. gel water and 20,000# 20/40# sd. Max. T.P. 3500#.
6. Pull tubing and packer. Rerun 2 3/8 tubing and rods. Start up well.

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

SIGNED _____ TITLE Operator DATE 7/28/82APPROVED BY Tom R. Minihan TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: