

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**  
2040 Pacheco St.  
Santa Fe, NM 87505

WELL API NO. 30-025-00383
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-9683
7. Lease Name or Unit Agreement Name Anderson Ranch Unit
8. Well No. 1
9. Pool name or Wildcat Wildcat
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4302' GL

**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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	2. Name of Operator Grand Banks Energy Company
3. Address of Operator 10 Desta Drive, Suite 300-East, Midland, Texas 79705	4. Well Location Unit Letter <u>G</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>1980</u> Feet From The <u>East</u> Line Section <u>11</u> Township <u>16S</u> Range <u>32E</u> NMPM Lea County
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: Re-Complete to Wolfcamp ☒

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.

6/27/97: Set 7" CIBP @ 9910'.  
7/08/97: Cement squeeze Wolfcamp (Saunders) Perfs: 9683'-9810' with 140 sx cement.  
7/11/97: Perf Wolfcamp (Saunders): 9795'-9797' and 9806'-9808'.  
7/14/97: Acidize Wolfcamp (Saunders) formation with 500 gallons, swab test.

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

SIGNATURE Tom M. Ragsdale TITLE Agent DATE 8/01/97  
TYPE OR PRINT NAME Tom M. Ragsdale TELEPHONE NO. 915-687-6600

(This space for State Use) ORIGINAL SIGNED BY CHRIS WILLIAMS  
DISTRICT I SUPERVISOR

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

CONDITIONS OF APPROVAL, IF ANY:

**AUG - 6 1997**