

State of New Mexico

Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION

1220 S. St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.

30 025 36973

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name:

Jalmat Field Sand Yates Unit

8. Well No.

208

9. Pool name or Wildcat

Jalmat (Tansil, Yates, Seven Rivers)

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 ~~injection~~

2. Name of Operator

Melrose Operating Co.

3. Address of Operator

c/o Box 953, Midland, TX 79702

4. Well Location

Unit Letter M 1310' feet from the South line and 330' feet from the West lineSection 14Township 22SRange 35E

NMPM

Lea

County

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

3587'

I 1. 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 ☐ MULTIPLE COMPLETION ☐OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐CASING TEST AND CEMENTJOB ☐OTHER: Spud to TD. ☒

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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

2-25-05: Spudded well. Drilling 12 1/4" hole.

2-26-05: Ran 430' of 8 5/8", 24#, J-55 casing. Cemented with 350 sx CI PP, circulated to surface. WOC. Pressured to 1000# for 30 minutes.

3-3-05: Reached total depth of 4160'.

3-4-05: Logged well. Ran 5 1/2", 15.5#, LTC casing to 4160'. Cemented with lead slurry of 350 sx Interfill C, tailed with 290 sx PP, 0.5% LAP-1, 0.4% CFR-2, 3lbm salt, 0.25 - cement circulated to surface. WOC. Rig released.

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

SIGNATURE

TITLE Regulatory Agent

DATE 3-21-05

Type or print name Ann E. Ritchie

Telephone No. 432 684-6381

(This space for State use)

APPROVED BY

OC FIELD REPRESENTATIVE II/STAFF MANAGER

DATE

Conditions of approval, if any:

MAR 31 2005