

HOBBBS OCD

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

APR 06 2012

State of New Mexico
Energy, Minerals and Natural Resources
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
March 4, 2004

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"/>		WELL API NO. 30-041-00010
2. Name of Operator: EOR Operating Company		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input checked="" type="checkbox"/>
3. Address of Operator 200 N. Loraine, Ste 1440, Midland TX 7701		6. State Oil & Gas Lease No.
4. Well Location Unit Letter <u>K</u> : <u>1980</u> feet from the <u>South</u> line and <u>1980</u> feet from the <u>West</u> line Section <u>12</u> Township <u>08S</u> Range <u>34-E</u> NMPM Roosevelt County		7. Lease Name or Unit Agreement Name Milnesand Unit
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		8. Well Number 152
9. OGRID Number 257420		10. Pool name or Wildcat Milnesand, San Andres

Pit or Below-grade Tank Application (For pit or below-grade tank closures, a form C-144 must be attached)

Pit Location: UL K Sect 12 Twp 08S Rng 34E Pit type Steel Depth to Groundwater _____ Distance from nearest fresh water well _____
 Distance from nearest surface water _____ Below-grade Tank Location UL _____ Sect _____ Twp _____ Rng _____ ;
1980 feet from the South line and 1980 feet from the West line

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input checked="" type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>	
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13. 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.

- Notified Maxey Brown w/OCD on MIRU, P/A 3/22/12
- Spot 25sx class c cmt from 4500-4138 3/23/12
- Tag TOC @ 4167, 3/24/12
- Circ MLF from 4167 to surf 3/24/12
- Perf @ 2965, sqz 40 sx class c cmt 3/24/12
- Tag TOC @ 2850 3/25/12
- Perf @ 1365, sqz 40 sx class c cmt, tag toc @ 1200, 3/25/12
- Perf @ 440, sqz 120sx class c cmt down 4 1/2 csg out perfs, up 4 1/2X8 5/8 annulus. to surf 3/25/12
- Cut/remove anchors, well head install dry hole plate and backfill 3/25/12

Approved for plugging of well bore only.
 Liability under bond is retained pending receipt

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐ a general permit ☐ or an (attached) alternative OCD-approved plan ☐.
 Forms, www.enr.state.nm.us/ocd.

SIGNATURE Jimmy Bagley TITLE Manager DATE 3/26/12
 Type or print name _____ E-mail address: _____ Telephone No. 432-561-8600

(This space for State use)

APPROVED BY Matey Brown TITLE Compliance Officer DATE 4/6/2012
 Conditions of approval, if any: _____

APR 10 2012