

Submit 1 Copy To Appropriate District
Office
District I - (575) 393-6161
1625 N French Dr, Hobbs, NM 88240
District II - (575) 748-1283
811 S First St, Artesia, NM 88210
District III - (505) 334-6178
1000 Rio Brazos Rd, Aztec, NM 87410
District IV - (505) 476-3460
1220 S St Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised August 1, 2011

HOBBS OCD

JUL 03 2012

OIL CONSERVATION DIVISION

220 South St. Francis Dr.
Santa Fe, NM 87505

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)		7. Lease Name or Unit Agreement Name DYER
1. Type of Well: <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Number 001
2. Name of Operator FULFER OIL & CATTLE LLC		9. OGRID Number 141402
3. Address of Operator P.O. BOX 1224, JAL, NM 88252		10. Pool name or Wildcat JALMAT;TAN-YATES-7RVRS(OIL)
4. Well Location Unit Letter <u>B</u> : <u>330</u> feet from the <u>NORTH</u> line and <u>2310</u> feet from the <u>EAST</u> line Section <u>31</u> Township <u>25S</u> Range <u>37E</u> NMPM County <u>LEA</u>		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2992 GR		

12. 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 COMPL ☐
DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER:

OTHER: RUN MIT

☒

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

Set pkr. @ 2770'. Pressured csg. to 520#, held OK.
Test witnessed by Sylvia Dickey, OCD 6/21/2012.
Top perforation 2835'.

Spud Date:

Rig Release Date:

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

SIGNATURE Debbie McKelvey TITLE AGENT DATE 7/3/12

Type or print name DEBBIE MCKELVEY E-mail address: debmkcelvey@earthlink.net PHONE: 575-392-3575

For State Use Only

APPROVED BY: Maury Brown TITLE Compliance Officer DATE 7/10/2012

Conditions of Approval (if any)

JUL 10 2012

