Form C-103				
May 27, 2004 WELL API NO.				
30-025-36987				
5. Indicate Type of Lease STATE x FEE				
6. State Oil & Gas Lease No.				
GT-1996				
7. Lease Name or Unit Agreement Name OPL 4 State				
8. Well Number #1				
9. OGRID Number				
113315 10. Pool name or Wildcat 297973				
WC-025 G07 5173604 P, Wolfcamp				
2				
feet from the _Eastline				
NMPM Lea County				
nce from nearest surface water				
struction Material				
Report or Other Data				
SEQUENT REPORT OF:				
☐ ALTERING CASING ☐				
RILLING OPNS. P AND A				
JOB				
recompletion x				
give pertinent dates, including estimated date				
ach wellbore diagram of proposed completion				
acid across perfs; swab well 8440-42', 8448-50', 8458',				
0440-42,8448-30,8438,				
9/14/12 Test CIBP & pkr to 1500#, held ok; Acid w/2000 gals 15% NEFE HCL; Swab well 9/18/12 Run tbg and put well back on production				
nd belief. I further certify that any pit or below-				
nd belief. I further certify that any pit or below- an (attached) alternative OCD-approved plan				
an (attached) alternative OCD-approved plan .				
DATE_10/18/12 Telephone No. 575-397-7450				
an (attached) alternative OCD-approved plan				

