| Submit 3 Copies To Appropriate District Office | State of New | Form C-103 | | | |
|--|--|-------------------------------|---------------------------------------|-------------------------|------------------------------|
| District I | Energy, Minerals and Natural Resources | | Revised March 25, 1999 WELL API NO. | | |
| 1625 N. French Dr., Hobbs, NM 88240 District II | OH COMPENSATION DIFFEREN | | | 300000 86 95 | |
| 1301 W. Grand Ave., Artesia, NM 88210 | | 5. Indicate Type of Lease | | | |
| District III 1220 South St. Francis Dr. 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 | | STATE FEE | | | |
| District IV 1220 S. St. Francis Dr., Santa Fe, NM | | 6. State Oil & Gas Lease No. | | | |
| 87505 | | | 7 1 > | TI-ia A NI- | |
| SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A | | | 7. Lease Name or Unit Agreement Name: | | |
| DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) | | | N.C. State SWD | | |
| 1. Type of Well: | | | | | |
| Oil Well Gas Well Other T&A SWD | | | | | |
| 2. Name of Operator Pure Resources | | | 8. Well No. | | |
| 3. Address of Operator | | | 9. Pool name or Wildcat | | |
| 500 W. Illinois Midland, Texas 79701 | | | Wolfcamp | | |
| 4. Well Location | | | | | |
| Unit Letter A: 1320 feet from the W line and 660 feet from the Eline | | | | | |
| Ome Detter | 77 Icet nom the mic | and <u>DDD</u> ict. | nom me <u>~</u> me | | |
| Section 3 | Township 16S | Range 32E | NMPM L | ea County | |
| 10. Elevation (Show whether DR, RKB, RT, GR, etc.) | | | | | |
| 3819' G R 11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | | | | | |
| NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: | | | | | |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON | REMEDIAL WOR | | ALTERING CASING | 3 🔲 |
| | | | · | | |
| TEMPORARILY ABANDON | CHANGE PLANS | COMMENCE DR | RILLING OPNS. | PLUG AND ABANDONMENT | |
| PULL OR ALTER CASING | MULTIPLE | | ND 🗆 | , D, 410 01 111 E1 17 | |
| | COMPLETION | CEMENT JOB | | | 4 4 4 4 1 4 4 1 4 6 |
| OTHER: | | OTHER: | | | |
| 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 | | | | | |
| recompilation. | | | | | |
| 13 3/8" 48# casing set at 425' (circ.) | | • | | | |
| 8 5/8" 32# casing set at 4138' (circ.) 5 ½" 17# casing set at 10800' (circ) | | | | | |
| | | • | | | , |
| Cased hole completion: 9552-9956' Injection Packer set at 9440' Arrow | ' set | | | 24.252627 | • |
| Injection Packer set at 9440' Arrow set Well communicated between tubing and casing. Work over date March 3, 2003 thru April 2, 2003 Pulled equipment out and found hole in tubing on 34th joint. Redressed packer and replaced top 15 joints of 2 3/8 IPC tubing RIH, with equipment and set packer at 9440' Post work over mechanical integrity test not witnessed by NMOCD. Starting Pressure: 520 P.S.I. Final Pressure: 515 P.S.I. | | | | | |
| RIH, with equipment and set packet | e in thomg on 54 John. Retressed p r at 9440' | acker and replaced top 15 joi | nts of 2 3/8 IPC thoma, | , v | ģ\ |
| Post work over mechanical intensity | v test not witnessed by NMOCD | | 707 | 225 | ¹² / ₂ |
| Starting Pressure: 520 P.S.I. | tust not withcosted by 14141000. | | 13 | 08 1 3 | 1 |
| Final Pressure: 515 P.S.L. | | | /82 | 28 1 | N/ w/ |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. | | | | | |
| ∞ b Ω_{∞} | / _ | <i>~</i> | Se mm porror. | 810. 681° | |
| SIGNATURE // M/6 / M/2 | that TITL | E TUYEMAN | | DATE 10/04/4- | 2003 |
| Type or print name Mike Northcut/ Telephone No. 525-346 - 25U3 | | | | | |
| (This space for State use) \ \OC FIELD REPRESENTATIVE II/STAFF MANAGER | | | | | |
| APPPROVED BY Lange | Wurk mil | | | DATED 0 4 20 | N 3 |
| Conditions of approval, if any: | **** | | | | y y |
| • | | | | | |

