

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

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
May 27, 2004

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

WELL API NO. 30-015-33762
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Catclaw Draw Unit
8. Well Number 21
9. OGRID Number 150628
10. Pool name or Wildcat Carlsbad; Morrow, South (Pro Gas)

RECEIVED  
JUL 15 2005  
OCD-ARTESIA

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 type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator Pure Resources, L.P.	
3. Address of Operator 500 W. Illinois, Midland, Texas 79701	
4. Well Location Unit Letter <u>D</u> : <u>660</u> feet from the <u>North</u> line and <u>1630</u> feet from the <u>West</u> line Section <u>14</u> Township <u>21S</u> Range <u>25E</u> NMPM Eddy County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3171' GR	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____	
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

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 ☐

SUBSEQUENT REPORT OF:

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

OTHER: Contingency alternate cement plan

OTHER: ☐

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.

Offset wells show a high possibility to encounter severe loss circulation @ 400'-1950'. Intermediate TOC needs to be @ surf. Proposed Foam cement program contingency plan increases the probability of circ cmt to surf.

- 1.) Intall floating equip, run csg to btm & circ minimum of 2-3 hole volumes prior to cmt'g
- 2.) Cmt w/Halliburton's ZoneSeal Process as follows: 40 bbl Gelled FW spacer. 10000 scf Nitrogen Spacer. Lead cmt: 675 sx of ZoneSeal Premium-Pluc cmt. 32 Bbls ZoneSeal Prem-Plus w/75scf/bbl N2, 760 Bbl ZoneSeal Prem-Plus w/85 scf/bbl N2. Once foam is circ to surf, hold  $\pm$  100 psi back pressure on annulus & SI to 5-10 bbl prior to landing plug. Check floats, pres csg to 500 psi.
- 3.) If foam cmt is not circ to surf: Pres 9-5/8" csg to + 1000 psi & monitor pres. Prepare to cmt down 9-5/8" X 13-3/8" annulus. Mix and pump 350 sx of Foamed Prem-Plus cmt, 95 bbl Prem-plus cmt with 75 scf/bbl N2. Mix & pump 100 sx of Thix-O-Tropic CAP cmt down the annulus. Displace CAP cmt w/ $\pm$  5 bbl FW to clear pumps, lines, & BOP. SI annulus, release pres on csg & allow CAP cmt to set.

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 ☐.

SIGNATURE Anna M. Schelling TITLE Regulatory Clerk DATE 07/14/05

Type or print name Anna M. Schelling Email address: aschelling@pureresources.com Telephone No. 432/620-5602

For State Use Only

DISTRICT II SUPERVISOR

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE JUL 15 2005

Conditions of Approval (if any):