

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

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.)		WELL API NO. 30-025-28382
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Doyle Hartman		6. State Oil & Gas Lease No.
3. Address of Operator 500 N. Main St., Midland, TX 79701		7. Lease Name or Unit Agreement Name Emery King "NW"
4. Well Location Unit Letter C : 440 feet from the North line and 2200 feet from the West line Section 1 Township 23S Range 36E NMPM Lea County		8. Well Number 6
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3421' GR		9. OGRID Number 6473
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/> Pit type 200 BBL Steel Circulating Pit Depth to Groundwater N/A Distance from nearest fresh water well > 1000' Distance from nearest surface water > 1000' Pit Liner Thickness: Steel Circulating Pit mil Below-Grade Tank: Volume 200 BBL Above Ground bbls; Construction Material Steel		10. Pool name or Wildcat Langlie Mattix

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: Run 4 1/2" FJ Casing <input checked="" type="checkbox"/>	

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.

Details of Completed Casing Repair Operations

10-18-05 to 10-21-05:

Pulled and laid down rods and 2 3/8" O.D. tubing. Cleaned out to 3809'.

Ran 4 3/4" bit and 5 1/2" casing scraper. Could not run casing scraper below 3730'.

Ran 4 3/4" O.D. tapered swedge to 3804'.

Repaired defective 5 1/2" O.D. casing by running and landing 4 1/2" O.D. 11.6 lb/ft casing at 3795'. Rigged up welder. Hung 4 1/2" O.D. casing. Sealed 5 1/2" x 4 1/2" casing annulus. Installed 2" threaded collar on side of 5 1/2" O.D. casing.

Pumped 60 bbls of water down 4 1/2" O.D. casing followed by 460 sx of API Class "C" cement containing 2.5% CaCl2. Dropped plug. Displaced cement to float collar, at 3788', with 58.5 bbls. Bumped plug.

Shut down 1.67 hrs. Pressure tested 5 1/2" x 4 1/2" casing annulus to 1037 psi. Pressure held okay. Pressure tested 4 1/2" O.D. casing to 1060 psi, for 1 hr (0' to 3788'). Pressure held okay (70 psi [6.6%] drop in 1 hr).

Defective casing now repaired.



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 on/above according to NMOC guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Steve Hartman TITLE Engineer DATE 11/03/2005

Type or print name Steve Hartman E-mail address: dhoo@swbell.net Telephone No. (432) 684-4011
For State Use Only

APPROVED BY: Harry W. Wink TITLE OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE NOV 08 2005
Conditions of Approval (if any):