| Submit 3 Copies To Appropriate District | State of Nev | w Mexico | | Form C-10 | 13 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|------------|
| Office District I | office Friends / Minerals and Natural Resources | | | Revised March 25, 199 |)9 |
| Submit 3 Copies To Appropriate District Office District I 1625 N. French Dr., Hobbs, NM 8 District II OIL CONSERVATION DIVISION | | | WELL API NO. | |] |
| | | | 30-025-35921 | | |
| off South Plat, Altesia, NW 67210 | | | 5. Indicate Type of Lease | | 1 |
| District III 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 District IV 2040 South Pacheco, Santa Fe, NM 9805 DIVISION | | | STATE [| FEE 🗴 | |
| District IV 2000 South Pachago, Santa Fe, NIAPHS CONSERVATION | | | 6. State Oil & Ga | s Lease No | 1 |
| 2040 South Facheco, Santa Fe, Niver 2040 | DIVISION | <i>y</i> | | 5 20a50 110. | |
| 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 | | | 7. Lease Name or Unit Agreement Name: | | |
| PROPOSALS.) 1. Type of Well: | | | FRED TURNER JR | . 'B' | |
| Oil Well X Gas Well Other | | | | | |
| 2. Name of Operator | 8. Well No. | · · · · · · · · · · · · · · · · · · · | - | | |
| • | | | | | |
| 3. Address of Operator | 003 | | | | |
| _ | 9. Pool name or Wildcat | | | | |
| P.O. BOX 2040 HOUSTON, TX. 77 | 7252 | | WEST NADINE-TO | BB-SKAGGS DRINKARD | ┨ |
| 4. Well Location | | | | | |
| Unit Letter N : | 990 feet from the | | 2040 feet fro | om the WEST line | е |
| Section 17 | Township 20 | | NMPM | County LEA | |
| | 10. Elevation (Show who | ether DR, RKB, RT, GR, e 3551' GR. | etc.) | 100 mg | |
| 11. Check | Appropriate Box to Indi | icate _l Nature of Notice | , Report, or Othe | r Data | |
| NOTICE OF INT | | | SEQUENT RE | | |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON | ☐ REMEDIAL WORK | | ALTERING CASING | Г |
| TEMPORARILY ABANDON | CHANGE PLANS | COMMENCE DRIL | | | |
| | = = | | | ABANDONMENT | - |
| PULL OR ALTER CASING | MULTIPLE COMPLETION | CASING TEST AND |) <u>x</u> | | |
| OTHER: | | OTHER: Running | Surface Casing | | X |
| Describe Proposed or Complet of starting any proposed work). or recompilation. | | | | | |
| 06-11-2003 thru 06-16-200 MI & RU Key Energy Rig # from 40' to 486'. Survey @ 1510' = 1 deg. Circulat casing. Shoe @ 1,510' FC C cement +2% CACL2 + 4% I @ 14.8 ppg. Displaced wit cement returns to surface test annular to 250/1500 shoe to 250 psi = 13.0 p | 38. Spud well @ 17:30 @ 486' = 1 deg. Drill te and condition hole. @ 1,426' used 16 centr Bentonite mixed at 13.5 th 91 bbls of water wit e. WOC 6 hrs. Nipple up psi. Test casing to 10 | to 985'. Survey @ 985'RU Rogers Csg. crew a ralizers. Circulate ar 5 ppg. Tail with 250 s ch full returns. Bumpa o and test BOP's test | o' = 3/4 deg. Dri and rum 36 jts. F and cement with BJ ox class C cement and plug with 1350 pipe rams and li oat EQUI and 10' | 11 to 1510'. Survey O 8-5/8" 24# J-55 STC . Pumped 400 sx class with 2% CACL2 mixed psi. Had 41 bbls of nes to 250/3000 psi of formation. Test | |
| | | | , | \$ 68 77 M | 31415 - |
| I hereby certify that the information above | e is true and complete to the be | est of my knowledge and beli | ef. | 100 | - |
| SIGNATURE BULL JETT G | | TITLE Regulatory Coo | rdinator | DATE 6/18/03 | _ |
| Type or print name Joev Kitchens | | | Teleph | none No. (713)609-5976 | <u>.</u> |
| (This space for State use) |). Wink oc | FIFE D DEGREES | 11/67455 11.11.5 | EB 4 2007 | - |
| APPROVED BY Conditions of approval, if any: | J. WMP OC | FIELD REPRESENTATIVE | II/SIAFF MANAG | ENUL 2 1 2003 | - |