Submit 1 Copy To Appropriate District State of New Mexico	Form C-103
Office District I – (575) 393-6161 Energy, Minerals and Natural Resources	Revised July 18, 2013
District II – (575) 748-1283 811 S. First St., Artesia, NM 88210	WELL API NO. 30 - 005 - 01710
811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION	5. Indicate Type of Lease
<u>District III</u> - (505) 334-6178	STATE FEE
District IV - (505) 476-3460 Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(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	Gulf Deep Well # 001
PROPOSALS.)	8. Well Number
1. Type of Well: Oil Well Gas Well Other Disposal	
2. Name of Operator Crain Hot Oil Serv. LLC 3. Address of Operator	9. OGRID Number 303735
3. Address of Operator	10. Pool name or Wildcat
POBOX S846 Granbury TX. 76049	
4. Well Location	24
Unit Letter : 660 feet from the North line and 1	
Section 34 Township 145 Range 31E	NMPM County Chaves
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
12. Check Appropriate Box to Indicate Nature of Notice,	Report or Other Data
12. Check Appropriate Box to indicate reactive of reduce,	Report of Other Data
	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WOR	
TEMPORARILY ABANDON	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT	JOB [
CLOSED-LOOP SYSTEM	
OTHER: repaire tubing V OTHER:	
13. Describe proposed or completed operations. (Clearly state all pertinent details, and	
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Corproposed completion or recompletion.	
20 12 0' " 1 1 + 20 1 1 1 1 1 1 1	head - Unset packer
oull tubing out of hole - repair tubing	leak tran tubing
oull tubing out of hole - repair land	in III annulus-
packer back inhole - Circulate packer flu	id o load with the
packer back inhole-Circulate packer flu et packer ann run integritt test ou casi	ng - nipple up well her
et packer and run	
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	ka
	1
	Cht.
Spud Date: Z-ZO-17 Rig Release Date: Z-Z	3-17
	F64ed to Hobbs 2-20-17
I hereby certify that the information above is true and complete to the best of my knowledg	e and belief.
$m \cdot 1 \cdot 1 \cdot 1 \cdot m$	7-20-17
SIGNATURE That Wanager	DATE Z-20-17
Type or print name Mike white E-mail address:	n hot Gil.com PHONE: 575-390-3776
Type or print name / // E-mail address:	PHUNE: 5/3-310-3770
	2/2/2019
APPROVED BY: Wally Stown TITLE AO/II	DATE 2/2017
Conditions of Approval (if any):	/