

Submit 1 Copy To Appropriate District Office

District I - (575) 393-6161  
1625 N. French Dr., Hobbs, NM 88240  
District II - (575) 748-1283  
811 S. First St., Artesia, NM 88210  
District III - (505) 334-6178  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV - (505) 476-3460  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico

Energy, Minerals and Natural Resources

Form C-103

Revised July 18, 2013

HOBBS OGD RECEIVED JAN 07 2019

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.	30-025-09818
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	Brown
8. Well Number	3
9. OGRID Number	141402
10. Pool name or Wildcat	Jalmat
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	GL 3074

**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  Gas Well  Other

2. Name of Operator  
Fulfer Oil & Cattle Co., LLC

3. Address of Operator  
PO Box 1224, 101 E. Panther Ave., Jal, NM 88252

4. Well Location  
Unit Letter C : 365 feet from the North line and 1650 feet from the West line  
Section 25 Township 25S Range 36E NMPM County Lea

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" 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"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1. Pull well & repair tubing leak 11/8/2018
2. Set 500 BBL Stock Tank, and water tank, 12/18/18
3. Test well 24 hr. 2 BBL's oil, 63 BBL's water, gas TSTM at present time, CSQ gas 3 psi tubing 7 psi 12/21/18

Spud Date: 5/2/1960 Rig Release Date: 5/8/1960

*278 tog @ 3196'*

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Mike Dennis TITLE Production Supervisor DATE 12/26/18

Type or print name Mike Dennis E-mail address: mdennis3082q@gmail.com PHONE: 432-940-1890

For State Use Only  
APPROVED BY: Jaren Sharp TITLE Staff Mgr DATE 1-7-19  
Conditions of Approval (if any):

