

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

DISTRICT I
P.O. Box 1980, Hobbs NM 88241-1980

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.
30-025-08971

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name
SOUTH EUNICE UNIT

8. Well No.
30

9. Pool name or Wildcat
EUNICE 7 RUVERS QUEEN SO.

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 INJECTION

2. Name of Operator
BRECK OPERATING CORP.

3. Address of Operator
P.O. BOX 911 BRECKENRIDGE TEXAS 76424

4. Well Location
Unit Letter 0 : 660 Feet From The SOUTH Line and 1650 Feet From The EAST Line

Section 21 Township 22S Range 36E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11. 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 ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☒
CASING TEST AND CEMENT JOB ☐
OTHER: ☐

12. 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.

8-21-03

CIBP @ 3500 W/ 25 SKS ONTOP

SPOT 25 SKS 3050' W.O.C. & TAG @ 2900

8-22-03

PERF & SQUEEZE @ 1724' 35 SKS W.O.C. & TAG @ 1556

PERF & SQUEEZE @ 358 25 SKS W.O.C. & TAG @ 300

8-25-03

PERF & SQUEEZE @ 290' 25 SKS W.O.C. & TAG @ 162

SPOT 10 SKS 60'-SURFACE

INSTALL P & A MARKER

CIRC MUD

Approved as to plugging of the Well Bore.
Liability under bond is retained until
surface restoration is completed.

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

SIGNATURE

TITLE CEMENTER

DATE 8-25-03

TYPE OR PRINT NAME JEFF KESTER

TELEPHONE NO. 432-547-2926

(This space for State Use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

OC DISTRICT SUPERVISOR/GENERAL MANAGER

DATE OCT 03 2003