

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.

30-025-24619

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

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.)

7. Lease Name or Unit Agreement Name

SOUTH EUNICE UNIT

1. Type of Well:

OIL
WELL ☐

GAS
WELL ☐

OTHER INJECTION

2. Name of Operator

BRECK OPERATING CORP.

8. Well No.

65

3. Address of Operator

P.O. BOX 911 BRECKENRIDGE TEXAS 76424

9. Pool name or Wildcat

EUNICE 7 RUVERS QUEEN SO.

4. Well Location

Unit Letter 0 : 660 Feet From The SOUTH Line and 1980 Feet From The EAST Line

Section

28

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.

8-15-03

SPOT 50 SKS 3450' W.O.C. & TAG @ 3015

8-18-03 SPOT 35 SKS @ 3015 W.O.C. & TAG @ 2600'

PERF & SQUEEZE 25 SKS @ 1500' W.O.C. & TAG @ 1346

8-19-03

SPOT 25 SKS @ 1320'-948

SPOT 40 SKS 600' TO 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 8-19-03

TYPE OR PRINT NAME JEFF KESTER

TELEPHONE NO. 432-547-2926

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

OC DISTRICT SUPERVISOR/GENERAL MANAGER

OCT 03 2003