State of New Mexico gy, Minerals and Natural Resources Departme

Form C	-103
Revised	1-1-89

District Office						
<u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION P.O. Box 2088		WELL API NO.			
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico 87504-2088		5. Indicate Type of Lease			
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410			6. State Oil & Gas I	STATE FEE K		
(DO NOT USE THIS FORM FOR PRODIFFERENT RESER	CES AND REPORTS ON WE POSALS TO DRILL OR TO DEEPER VOIR. USE "APPLICATION FOR PE 101) FOR SUCH PROPOSALS.)	N OR PLUG BACK TO A	7. Lease Name or U	nit Agreement Name		
1. Type of Well:	Type of Well:			1		
2. Name of Operator	OTHER DIT	He MeTT	Brine Well 8. Well No.	L		
McCasland Ser	vices. Inc.		1.			
3. Address of Operator	Eunice,NM 88231		9. Pool name or Wil	dcat		
4. Well Location	Feet From The NW/4	I ine and	Feet From T	he SE/4 Line		
Section 34			NMPM	Lea _{County}		
	10. Elevation (Show whether	DF, KKB, KI, GR, etc.)				
Charle	Appropriate Box to Indicate	Nature of Nation D	anast as Other I	<u> </u>		
NOTICE OF INT		REPORT, OF Other Data BSEQUENT REPORT OF:				
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	A	LTERING CASING		
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS. D	LUG AND ABANDONMENT		
PULL OR ALTER CASING CASING TEST A			MENT JOB			
OTHER:		OTHER:				
12. Describe Proposed or Completed Operation work) SEE RULE 1103.	ions (Clearly state all pertinent details, a	and give pertinent dates, include	ling estimated date of s	tarting any proposed		
 R.U. Rotary Wire go below 1202'. PO.O.H.w/ 1232' R.I.H. w/ C.I.B. retrievable pkr, 	ipple down well head, line; R.I.H. w/ free p Tbg. R.I.H. w/ bit, Co P. set @ 1190'. Dump 1 test bridge plug, tes	ooint, Tbg. free ould not get bel 0' cement on to	to 1200', co ow 1200'. C.I.B.P., R.	I.H. w/		
Decided to plug well. 5) R.I.H. open ended, tag cement on top of C.I.B.P. @ 1180', pump 112 sks class C cement P.O.O.H. W.O.C. 5 Hr. R.I.H. Tag top of cement@ 515'. Mix 87 sks.class C cement.						
6) R.I.H. Tag cemen	t@ 45'. Mix 7 sks ceme hole marker & cap.	ent. Fill csg. to	o surface. Cu	ut well head		
		A L. U. P	·			
I hereby certify that the information above is true	and complete to the best of my knowledge and	•	•			
SIGNATURE 1	т	ns Company Rer) <u>.</u>	DATE		
TYPEORIFRINT NAME Ray D. Rar	nsey			TELEPHONE NO.		
(This space for State Use) ORIGINAL SIGNED BY DISTRICT I SUPP	EKAIZOK	ne		FEB 2 8 1994		
CONDITIONS OF APPROVAL, IF ANY:				•		