

RECEIVED

## OIL CONSERVATION DIVISION

SEP 18 2008

1220 South St. Francis Dr.

Santa Fe, NM 87505

HOBBS OCD

WELL API NO.  
30-025-38877 ✓

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil &amp; Gas Lease No.

7. Lease Name or Unit Agreement Name  
South Lovington 25 ✓

8. Well Number 1 ✓

9. OGRID Number  
224400 ✓10. Pool name or Wildcat  
Wildcat Devonian ✓

## 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

Edge Petroleum Operating Company, Inc. ✓

3. Address of Operator

1301 Travis Ste. 2000 Houston, TX 77002

4. Well Location

Unit Letter E: 1977 feet from the North line and 330 feet from the West line ✓

Section 25 Township 16S Range 36E NMPM Lea County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

3848 GL

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type \_\_\_\_\_ Depth to Groundwater \_\_\_\_\_ Distance from nearest fresh water well \_\_\_\_\_ Distance from nearest surface water \_\_\_\_\_

Pit Liner Thickness: \_\_\_\_\_ mil Below-Grade Tank: Volume \_\_\_\_\_ bbls; Construction Material \_\_\_\_\_

## 12. 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 ☐ MULTIPLE COMPL ☐OTHER: Devonian Completion ☒

## SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐COMMENCE DRILLING OPNS. ☐ P AND A ☐CASING/CEMENT JOB ☐OTHER: ☐

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

## DEVONIAN COMPLETION

9-9-08 MI &amp; RU W/O unit. NU 5K BOP.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.SIGNATURE Angela Lightner TITLE Consultant DATE 9-9-2008Type or print name Angela Lightner E-mail address: angela@rkford.com Telephone No. 432-682-0440

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APPROVED BY: [Signature] TITLE PETROLEUM ENGINEER DATE SEP 18 2008

Conditions of Approval (if any):