

Office

District I

1625 N French Dr., Hobbs, NM 88240

District II

1301 W Grand Ave., Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

1220 S St Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103

June 19, 2008

RECEIVED

OIL CONSERVATION DIVISION

JUN 12 2009

HOBBSOCD

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.

30-025-20695

5. Indicate Type of Lease

STATE ☐ FEE ☐

6. State Oil &amp; Gas Lease No.

BLM NM-NM052

7. Lease Name or Unit Agreement Name

Mescalero Ridge 35 Unit

8. Well Number 008

358

9. OGRID Number 14591

10. Pool name or Wildcat

Pearl (Queen)

## 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 Injector ☒

2. Name of Operator

Merit Energy Company

3. Address of Operator

13727 Noel Rd. Suite 500 Dallas, Texas 75240

4. Well Location

Unit Letter K : 1980 feet from the S line and 1980 feet from the W lineSection 35 Township 19S Range 34E NMPM LEA County ✓

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

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

## NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK X PLUG AND ABANDON ☐TEMPORARILY ABANDON ☐ CHANGE PLANS ☐PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐DOWNHOLE COMMINGLE ☐OTHER: ☐

## 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.

Objective: Repair leaking inj. Pkr/ hole in tbg.

MIRU PU. ND WH. NU BOPE. RU SL. RIH w/blanking plug in profile nipple of Baker Hornet injection pkr. RD SL. Test Tbg. for integrity. If tbg. tests, POOH w/injection pkr. &amp; tbg. string. Re-dress injection pkr. &amp; RIH w/pkr. And tbg. string Testing in. If tbg. does not test; unseat tbg. from on-off tool. POOH &amp; RIH w/tbg. string testing in. Retrieve blanking plug. ND BOPD. NU WH. RD PU. Resume injection.

MIT, Pressure test before use.

Spud Date:

11/19/64

Rig Release Date:

12/08/64

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

SIGNATURE Lynne Moon TITLE Regulatory Manager DATE 06 / 10 /09Type or print name Lynne Moon E-mail address:  PHONE: 972-628-1569

For State Use Only

APPROVED BY: Tammy M. Hill TITLE DISTRICT 1 SUPERVISOR DATE JUN 19 2009

Conditions of Approval (if any):