| | Submit 1 Copy To Appropriate District | ffice Energy, Minerals and Natural Resources 525 N. French Dr., Hobbs, NM 88240 istrict II OIL CONSERVATION DIVISION | | Form C-103 | | |
|------------|--|---|--------------------|--------------------------------|-------------------------|--|
| | Office District I | | | | October 13, 2009 | |
| | 1625 N. French Dr., Hobbs, NM 88240 | | | WELL API NO. / 30-025-32741 | | |
| | District II 1301 W. Grand Ave., Artesia, NM 88210 | | | 5. Indicate Type o | flease | |
| | District III | District III District III DEPT. 1220 South St. Francis Dr. | | STATE | | |
| | District III 1000 Rio Brazos Rd, Aztec, NM 874 C Santa Fe, NM 87505 1220 S. St. Francis Dr, Santa Fe, NM MAK 0 1 2010 | | | 6. State Oil & Gas | | |
| | | | | В 6807 | | |
| | 8/303 | | | 7. Lease Name or | Unit Agreement Name | |
| | 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.) | | | | | |
| | | | | Kaiser State | | |
| | 1. Type of Well: Oil Well, 🗹 Gas Well 🗌 Other | | | 8. Well Number 44 | | |
| | 2. Name of Operator | | | 9. OGRID Numbe | er 161968 | |
| | Mesquite SWD Inc. | | | 10. Pool name or Wildcat | | |
| | 3. Address of Operator P.O. Box 1479 Carlsbad NM 88221-1479 | | | Seven Rivers | | |
| | | | | Beven Rivers | | |
| | 4. Well Location Unit Letter : 2310 feet from the North line and 2310 feet from the | | | | | |
| | | | | | | |
| | West line | | | | | |
| | Section 13 Township 21S Range 34E NMPM CountyLea 11. Elevation (Show whether DR, RKB, RT, GR, etc.) | | | | | |
| | | 1. Elevation (Snow whether DK, | KKD, KI, GK, eic., | | | |
| | | | | | | |
| , • | 12. Check App | propriate Box to Indicate N | ature of Notice, | Report or Other | Data | |
| | •• | • | | _ | | |
| | | | | SEQUENTRE | | |
| <u>-</u> \ | PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORTEMPORARILY ABANDON CHANGE PLANS COMMENCE DR | | | • | ALTERING CASING P AND A | |
| _ | | CHANGE PLANS MULTIPLE COMPL | CASING/CEMEN | | FANDA | |
| | DOWNHOLE COMMINGLE | MOLTIPLE COMPL | CASING/CLIVILIN | 1300 🖂 | | |
| | DOWNINGE COMMINITORE | | 1 | 1 | | |
| | OTHER; | | OTHER: / | A | | |
| | 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. | | | | | |
| | proposed completion of recompletion. | | | | | |
| | 1)Tih with packer and 2 3/8"tubing at 3460'circ hole. | | | | | |
| | Movede up the hole to 1800' pressured uo below packer to 500# held moved up to 1640' test csg below packer to 500# did not | | | | | |
| | old. Tested above packer held. | | | | | |
| | Pu cement retainer tih set at 1670' est pumping a ½ to 3/4bbl at 400#. | | | | | |
| | 4)Ru rising star to squeeze hole pumped 150sxs of class c cement pressured started building did not squeeze sdfd 5)Ru rising star est rate at 1/4 bbl at 650# pumped 100sxs cement pressure built to 1200 # held | | | | | |
| | 6)Toh waited 24hrs | (i) Toh waited 24hrs 2 Total Depth ??!! (i) Thi with 6" bit and collars tagged at 1640" cleaned out circ hole with packer fluid rd Eunice well services. | | | | |
| | 7) Tih with 6" bit and collars tagged at 1640' cleaned out circ hole with packer fluid rd Eunice well services. | | | | | |
| | 8) Notify the OCD ran MIT 2-25-2010 presured up to 535# held for 30 min witness by Mark Whitaker OCD Hobbs | | | | | |
| | This Annual of Tamparers | | | | | |
| | This Approval of Temporary Abandonment Expires 25-2015 | | | | | |
| | undilinitie invita a memoran | | | | | |
| | Spud Date: | Rig Release D | ate: | | | |
| | | | | | | |
| | | | | | | |
| | hereby certify that the information above is true and complete to the best of my knowledge and belief. | | | | | |
| | | | | | | |
| | SIGNATURE / LL MALE 1-25-2010 | | | | | |
| | SIGNATURE / / /// NAIV I | TITI F Presid | lent DATE | E 2-25-2010 | | |
| | SIGNATURE/AU/AMA/ | TITLE_Presid | lentDATE | E 2-25-2010 | | |
| | Type or print name _Clay LWilson | TITLE_Presid | | | 40 | |
| | | | | HONE: 575-706-184 | | |
| | Type or print name _Clay LWilson | E-mail address:claylwilso | | HONE: 575-706-184 | 10 TE_3-4-10_ | |

