

State of New Mexico
Energy, Minerals and Natural Resources

RECEIVED

OCT 10 2010

HOBBS

CONSERVATION DIVISION

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.

30-025-06414 ✓

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Eumont Hardy Unit

8. Well Number 038 ✓

9. OGRID Number

151228 ✓

10. Pool name or Wildcat ✓

Eumont; Yates, 7 Rvrs, 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 ☒ WIW

2. Name of Operator

Mar Oil and Gas Corporation

3. Address of Operator

PO Box 5155 Santa Fe, NM 87502

4. Well Location

Unit Letter I : 3300 feet from the North line and 660 feet from the East lineSection 6 Township 21S Range 37E NMPM Lea County

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

3502 GL

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 ☐
 DOWNHOLE COMMINGLE ☐

SUBSEQUENT REPORT OF:

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

OTHER: ☐OTHER: **Perf and acidize** ☒

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.

Replace well head x Clean out to TD 3785ft x Run 4 1/2" 10.5# K55 ST&C casing to 3769ft x Cement with 450 sx cement
 Circulate 23 sx to surface x WOC x Drill out to PBTD 3763ft x Run GR/CCL x Perforate 3666-3672ft x 3672-3763ft with 2 SPF
 Acidize perforations with 2000 gallons 15% NEFE x Run Plastic Coated AD1 packer with 2 3/8" Plastic coated tbgs to 3601ft
 Displace casing with 50 bbls inhibited fluid x PSA 3601ft x Pressure test to 600psi for 30 minutes OK.
 Notify E.L.Gonzales of pending MIT on 3/3/2010
 3/4/2010 Pressure test casing x tbgs annulus to 350 psi for 30 minutes OK
 Turn well to injection service
 Enclosed pressure chart

Spud Date:

Rig Release Date:

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

SIGNATURE

*Billy E. Prichard*TITLE **Field Supervisor**

DATE

3/4/10Type or print name **Billy E. Prichard**E-mail address: **billy@pwllc.net**PHONE: **4329347680****For State Use Only**

APPROVED BY:

E.L. Gonzales

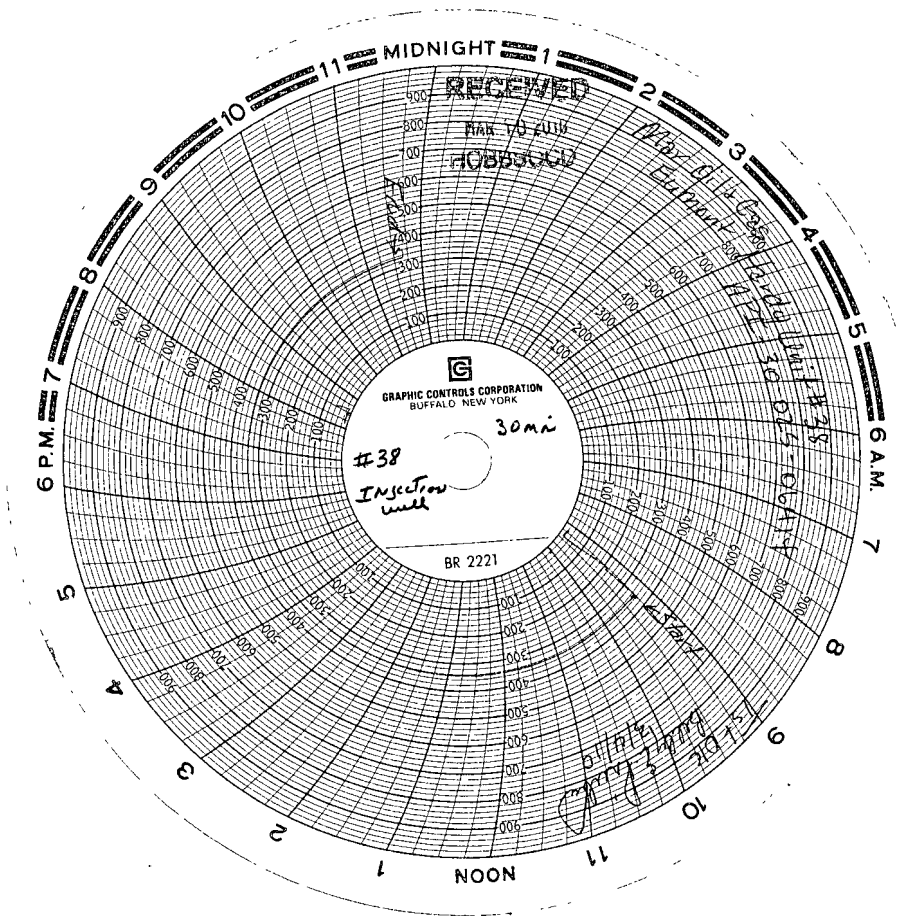
TITLE

STAFF MGR

DATE

3-11-10

Conditions of Approval (if any):



American Valve & Meter, Inc.

1113 W. BROADWAY

P.O. BOX 166

HOBBES, NM 88240

TO: Colborn

DATE: 03-03-70

This is to certify that:

I, Bud Collins, Technician for American Valve & Meter,

Inc., has checked the calibration of the following instrument.

8" Duelpac press recorder Serial No: MFG 1109

at these points.

Pressure 0-1000

Temperature 0-3000

<u>Test</u>	<u>Found</u>	<u>Left</u>	<u>Test</u>	<u>Found</u>	<u>Left</u>
<u>0</u>	<u>—</u>	<u>0</u>	<u>0</u>	<u>—</u>	<u>0</u>
<u>500</u>	<u>—</u>	<u>500</u>	<u>1500</u>	<u>—</u>	<u>1500</u>
<u>1000</u>	<u>—</u>	<u>1000</u>	<u>3000</u>	<u>—</u>	<u>3000</u>
<u>700</u>	<u>—</u>	<u>700</u>	<u>2100</u>	<u>—</u>	<u>2100</u>
<u>200</u>	<u>—</u>	<u>200</u>	<u>600</u>	<u>—</u>	<u>600</u>
<u>0</u>	<u>—</u>	<u>0</u>	<u>0</u>	<u>—</u>	<u>0</u>

Remarks: _____

Signature _____