

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-025-36142
Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
State Oil & Gas Lease No. N/A
Lease Name or Unit Agreement Name Sapphire
Well No. 3
Pool name or Wildcat Nadine : Drinkard-Abo

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.)	
Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	
Name of Operator Trilogy Operating, Inc	
Address of Operator P.O. Box 7606, Midland Texas 79708	
Well Location Unit Letter <u>H</u> : <u>2310</u> Feet From The <u>North</u> Line and <u>990</u> Feet From The <u>East</u> Line Section <u>24</u> Township <u>19S</u> Range <u>38E</u> NMPM Lea County	
Elevation (Show whether DF, RKB, RT, GR, etc.) 3580 GR	

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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 ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ANBANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: Completion ☐

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.

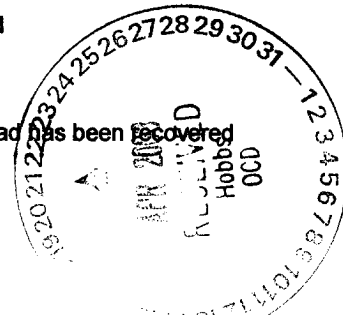
4/03/03 - MIRU pulling unit, perforate Drinkard Formation from 6952'-6968' , 6974'-6980' , 7020'-7034' , 7058'-7062' , 2 spf = 80 holes

4/04/03 - Acidize perms w/ 2000 gals 15% NEFE - swab back load w/ good shows of oil & gas

4/07/03 - Frac perms down 5 1/2" csg @ 20 bpm w/ 76,000 gals Xlink gel + 115,500# 16/30 Ottawa sand

4/10/03 - Run rods & pump, unable to keep well flowing

4/11/03 - Pumped 68 BO + 45 BW + 400 mcf , 1000 bbls of load to be recovered - potential well after load has been recovered



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

SIGNATURE Michael G. Mooney TITLE Engineer DATE 04-16-03
TYPE OR PRINT NAME Michael G. Mooney TELEPHONE NO. 915/686-2027

(This space for State Use)

APPROVED BY Ray W. Wink TITLE OCC FIELD REPRESENTATIVE II/STAFF MANAGER DATE APR 22 2003
CONDITIONS OF APPROVAL, IF ANY: