

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Mineral and Natural Resources Department

Form C-103  
Revised 1-1-89

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  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-01036
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name State 'C' A/C - 1
8. Well No. 3
9. Pool name or Wildcat Bagley Siluro - 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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER SWD	
2. Name of Operator Oryx Energy Company	
3. Address of Operator P. O. Box 1861, Midland, TX 79702	
4. Well Location Unit Letter L : 1980 Feet From The South Line and 660 Feet From The West Line Section 2 Township 12-S Range 33-E NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4254' DF	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: Acidize <input checked="" type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <input type="checkbox"/>

12. 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.

1. NOTIFY STATE NEW MEXICO OIL CONSERVATION DIVISION PRIOR TO CSG TEST.
2. MIRU SWAB UNIT & HALIB PUMP TRUCK & LINES. TRAP 500# ON CSG. ACIDIZE OH 11034-11370' W/ 8000 GAL 15% HCL W/ NE SURF & FE AGENT IN 4 STAGES WITH 3000 GAL 10# GEL AND 6000# GRS AS FOLLOWS:

STAGE 1: 2000 GAL 15% NEFE HCL. MP 5000 PSI  
1000 GAL 10# GEL BRINE W/ 2#/GAL GRS  
STAGE 2: 2000 GAL 15% NEFE HCL. MAX P 5000 PSI  
2000 GAL 10# GB SPACER  
1000 GAL 10# GEL BRINE W/ 2#/GAL GRS ADJUSTED ACCORDINGLY  
(Cont. on Page 2)

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

SIGNATURE Maria L. Perez TITLE Proration Analyst DATE 4-4-91  
TYPE OR PRINT NAME Maria L. Perez TELEPHONE NO 915/688-0375

(This space for State Use) GRADING COMPLETED BY RAYMOND  
11-11-1991

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: