

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-

5a. Indicate Type of Lease
State ☒ Fee ☐
5. State Oil & Gas Lease No.
NM 211

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. OIL <input checked="" type="checkbox"/> GAS <input type="checkbox"/> OTHER <input type="checkbox"/> WELL	7. Unit Agreement Name
2. Name of Operator Sun Exploration & Production Company	8. Farm or Lease Name State C A/C 1
3. Address of Operator P.O. Box 1861 Midland, Texas 79702	9. Well No. #4
4. Location of Well UNIT LETTER M 660 FEET FROM THE South LINE AND 660 FEET FROM THE West LINE, SECTION 2 TOWNSHIP 12S RANGE 33E NMPM.	10. Field and Pool, or Wildcat Bagley Penn
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Lea

16.

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER Clean out fill & Put back on injection <input checked="" type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input type="checkbox"/>

17. 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. MIRU. NU BOP. Rlse pkr & POH.
2. RIH w/5-7/8 RD, DC's & oil jars on 2-7/8 WS. Tag PBTB.
3. Break circulation. CO OH to TD 11,275 as necessary.
4. PU to \pm 10,800 (inside casing) S.D. for 2 hrs.
5. Retag TD 11,275 to check for additional fill. POH.
6. RIH w/7" Perma-Latch pkr on 3-1/2, 9.3# P.C. tbq as before.
7. Set pkr 10725. Otis WL set blanking plug in nipple.
8. Test tbq to 1000 psi, rlse tbq, circ ann. w/frsh wtr w/
9. 10 gals/100 bbls Tretolite KW-79.
10. Latch onto pkr w/on-off tool. Retrieve blanking plug.
11. N.J. Wellhead & put on injection.

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

SIGNED Velma Reyes TITLE Sr. Accounting Assistant DATE 7/26/85

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY 4619 TITLE DATE JUL 31 1985

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

JUL 30 1985

Q.C. 9.
HOURS 6:00-12:00