

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals 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.

30-025-03563

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

MERRELL

8. Well No.

1

9. Pool name or Wildcat

ALLISON PENN

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

SWD

2. Name of Operator

LAYTON ENTERPRISES, INC.

3. Address of Operator

3103 79TH ST LUBBOCK, TX. 79423

4. Well Location

Unit Letter H : 1980 Feet From The NORTH Line and 330 Feet From The East Line

Section

10

Township

9S

Range

36E

NMPM

LEA

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11.

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 ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☒

OTHER: REPLACE TUBING ☒

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.

PULLED TUBING & PACKER - LAID DOWN 3 1/2" HYDRIL
TUBING - REPLACED WITH NEW 2 7/8" EVE PLASTIC
COATED TUBING - RAN TUBING WITH NEW PLASTIC
COATED LOK-SET PACKER - FLUSHED CASING W/ 250
BBLs. PACKER FLUID - SET PACKER @ 9742 -
LOADED CASING-TUBING ANNULUS W/ PACKER FLUID &
TESTED TO 300 PSI FOR 30 MIN.

RESUMED INJECTION ON 3-13-93 W/ TUBING PRESS 27" VACU

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

SIGNATURE

Donald R. Layton

TITLE

PRESIDENT

DATE

3-15-93

TYPE OR PRINT NAME

DONALD R. LAYTON

TELEPHONE NO.

806/745-461

(This space for State Use)

APPROVED BY

TITLE

DATE

MAR 17 1993

CONDITIONS OF APPROVAL, IF ANY:

