

STATE OF NEW MEXICO

Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89Submit 3 Copies
to Appropriate
District Office

OIL CONSERVATION DIVISION

DISTRICT I

2040 Pacheco St.

P.O. Box 1980, Hobbs, NM 88240

Santa Fe, NM 87505

DISTRICT II

P.O. Drawer DD, Artes a, NM 888210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.

30-025-24737

5. Indicate Type of Lease

STATE ☒FEE ☐

6. State Oil & Gas Lease No.

E-1811-3

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 ☒

GAS

WELL ☐

OTHER

2. Name of Operator

Paladin Energy Corp.

8. Well No.

1

3. Address of Operator

10290 Monroe Dr., Ste. Ste 301, Dallas, TX 75229

9. Pool name or Wildcat

Bagley Siluro-Devonian

4 Well Location

Unit Letter _____ : 660 Feet From The South Line and 1900 Feet from The East Line

Section 35 Township 11-S Range 33-E NMPM Lea County

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

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 ☐ALTRG CSG ☐COMMENCE DRLG OPNS. ☐P&A ☐CSG TST & CMT JOB ☐OTHER: Add Perforations to Devonian ☒

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent date, including estimated date of starting any proposed work) SEE RULE 1103

3/1/00 to 3/8/00

M. I. & R. U. NU BOP, TOH/W tubing and sub pump. Drilled out bridge plug at 10,612' and cleaned to 10,700'. Left existing perforations open at 10,524-540', 10,578-88'. RU Wireline, ran 4.7" gauge ring to 10,675'. TIH/W 4" hollow carrier gun, perforated from 10,620-642 and 10,650-672' 2SPF. Performed 5000 gal Acid Job. TIH/W submersible pump and tubing, set pump at recommended setting. Returned well to production.

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

SIGNATURE

TITLE

Production Manager

DATE

4/29/00

214-654-0132

TYPE OR PRINT NAME

David Plaisance

TELEPHONE NO.

(This space for State Use)

APPROVED BY

 TITLE
 ORIGINAL SIGNED BY DHHIS WILLIAMS
 DISTRICT I SLP ADVISOR

DATE

CONDITIONS OF APPROVAL, IF ANY: