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# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

5a. Indicate Type of Lease
State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.
L-1080

## 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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	7. Unit Agreement Name
2. Name of Operator Coastal Oil & Gas Corp.	8. Farm or Lease Name Sawyer State
3. Address of Operator P. O. Box 235, Midland, Texas 79702	9. Well No. 2
4. Location of Well UNIT LETTER <u>A</u> FEET FROM THE <u>660</u> LINE AND <u>660</u> FEET FROM <u>East</u> <u>4</u> <u>10-S</u> <u>37-E</u> THE LINE, SECTION TOWNSHIP RANGE NMPM.	10. Field and Pool, or Wildcat West Sawyer-San Andres
15. Elevation (Show whether DF, RT, GR, etc.) 3983.4 GR	12. County Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

### NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐  
TEMPORARILY ABANDON ☐  
PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐  
CHANGE PLANS ☐

### SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐  
COMMENCE DRILLING OPNS. ☐  
CASING TEST AND CEMENT JOB ☐  
OTHER ☐

ALTERING CASING ☐  
PLUG AND ABANDONMENT ☐

OTHER Extension of time C-103 11-3-80 ☒

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.

\* Cl "C", 2% CaCl<sub>2</sub>, (100% excess)

\*\*First Stage: 50/50 Po<sub>2</sub> Cl "C", 2% CaCl<sub>2</sub>, 1/4#/sx. Flocele (25% excess) 430 sxs.

Second Stage: DV Tool @ + 2500', Cl "C", 4% Gel, 2% CaCl<sub>2</sub>, 5# sx gilsonite, 1/4# sx. Flocele (150% excess) 690 sxs.

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

SIGNED Sue Vanderford Sue Vanderford, TITLE Operations Analyst

DATE 1-15-81

APPROVED BY Jerry Saxton  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

JAN 19 1981

Size XX Fee 0  
L-1080

## SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO CLEAN UP OIL BACK TO A DIFFERENT RESERVOIR.  
USE APPLICATION FOR PERMIT - II (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- <input type="checkbox"/>		7. Unit Agreement Name	
Name of Operator Coastal Oil & Gas Corp.		8. Part of the State Sawyer State	
9. Address of Operator P. O. Box 235, Midland, Texas 79702		9. Well No. 2	
4. Location of Well UNIT LETTER <u>A</u> <u>660</u> North <u>660</u> FEET FROM THE LINE AND FEET FROM <u>East</u> <u>4</u> <u>10-S</u> <u>37-E</u> THE LINE, SECTION TOWNSHIP RANGE		10. Field and Pool, or Unit West Sawyer - San Andre	
15. Elevation (Show whether DF, RT, GR, etc.) 3983.4 GR		11. County Lea	

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"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>  CHANGE PLANS <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER _____ <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/>
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OTHER Extension of time - C-101 - 6-18-80 ☒

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.

\* Cl "C", 2% CaCl<sub>2</sub> (100% excess)

\*\* First Stage: 50/50 Poz CL "C", 2% CaCl<sub>2</sub>, 1/4#/sx. Flocele (25% excess) 430 sxs.

Second Stage: DV Tool @ + 2500', CL "C", 4% Gel, 2% CaCl<sub>2</sub>, 5#/sx gilsonite, 1/4# sx Flocele (150% excess) 690 sxs.

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

*Sue Vanderford* Sue Vanderford

Operations Analyst

DATE 11-3-80

Orig. Signed by  
Jerry Sexton

APPROVED BY \_\_\_\_\_ **Dist. L. Supl.**  
CONDITIONS OF APPROVAL, IF ANY:

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# NEW MEXICO OIL CONSERVATION COMMISSION

30-025-26893

Form C-101  
Revised 1-1-65

5A. Indicate Type of Lease
STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
5. State Oil & Gas Lease No.
L-1080

## APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work		7. Unit Agreement Name	
b. Type of Well DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/>		8. Firm or Lease Name	
c. Name of Operator Coastal Oil & Gas Corporation		Sawyer State	
3. Address of Operator P. O. Box 235 Midland, Texas 79701		9. Well No. 2	
4. Location of Well UNIT LETTER A LOCATED 660 FEET FROM THE North LINE AND 660 FEET FROM THE East LINE OF SEC. 4 TWP. 10-S RGE. 37-E NMPM		10. Field and Pool, or Willcat West Sawyer - San Andres	
11. County Lea		12. County Lea	
13. Proposed Depth 5100		14. Formation San Andres	
15. Kind & Status Plug. Bond Blanket on File		16. Rotary or C.T. Rotary	
21. Elevation (show whether DF, RT, etc.) 3983.4 GR		22. Approx. Date Work will start July 30, 1980	

### PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
11	8 5/8	24	450	173	To circulate *
7 7/8	5 1/2	15.5	5100	1150	250' **

- \* Cl"C", 2% CaCl<sub>2</sub> (100% excess)
- \*\* First Stage: 50/50 Poz CL "C", 2% CaCl<sub>2</sub>, 1/4#/sx. Flocele (25% excess) 430 sxs.  
Second Stage: DV Tool @ + 2500', Cl "C", 4% Gel, 2% CaCl<sub>2</sub>, 5#/sx gilsonite, 1/4#/sx Flocele (150% excess) 690 sxs.

APPROVAL VALID  
FOR 90 DAYS UNLESS  
DURING COMMENCED,

EXPIRES 10-18-80

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

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

Signed [Signature] Title Sr. Drilling Engineer Date June 18, 1980

(This Space for State Use)

APPROVED BY [Signature] TITLE SUPERVISOR DISTRICT I DATE JUL 18 1980

CONDITIONS OF APPROVAL, IF ANY: