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		OIL CONSERVATION DIVISION			WELL API NO.	
DISTRICT II	•	P.O. Box 2088 Santa Fe, New Mexico 87504-2088			30-025-30465	
DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 87410 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.)					5. Indicate Type of Lease STATE X FEE	
					6. State Oil & Gas Lease No. V-2549	
					7. Lease Name or Unit Agreement Name	
1. Type of Well: OL. XX	WELL WELL OTHER RE-CALLY				Wolverine, 9011 JV-P	
2. Name of Operator BTA 0:11	Producers				8. Well No.	
3. Address of Operat					9. Pool name or Wildcat	
104 S. Pe	ecos, Midland	, TX 79701		· · · · · · · · · · · · · · · · · · ·	Wildcat (San Andres)	
	L:2150	Township 10S	Ra	inge 33E	Feet From The West Line NMPM Lea County	
		4205'	GR	DF, RKB, RT, GR, etc.)		
11. NC	Check A OTICE OF INTE	ppropriate Box to Ind ENTION TO:	icate l		eport, or Other Data SEQUENT REPORT OF:	
PERFORM REMEDIA	AL WORK	PLUG AND ABANDON		REMEDIAL WORK	ALTERING CASING	
TEMPORARILY ABA		CHANGE PLANS		COMMENCE DRILLING		
PULL OR ALTER CA	SING			CASING TEST AND CE	EMENT JOB	
OTHER:				OTHER:	Perf & Testing XX	
12. Describe Proposed work) SEE RULE	l or Completed Operation 1103.	ns (Clearly state all periment d	etails, a v	nd give pertinent dates, inclu	ding estimated date of starting any proposed	
4-22-91	TD 12,822', PB 4705', Perf (San ANdres) 4599-4614' (31 holes) Disp 200 gal acid, A w/2000 gal 15% NE-FE + tall sealers.					
4-23-91	Swbg & testing					
4-24-91	A w/750 gal 15% HCL & 250 gal zylene + ball sealers.					
4-25-91	Swbg & testing.					
4-26-91	Verbal Approval to P & A by Paul Kautz ClBP @ 4500' w/100' cmt on top Spotted 15 sx plug 4210'-4090', Spotted 15 sx plug 2010'-1890', Spotted 10 sx plug @ surface. Installed dry hole marker. P & A 4-26-91.					
I hereby certify that the	information above is true	ed complete to the best of my know	ledge and	belief.		
SIGNATURE	rely	leughter	<u> </u>	Regulatory Ad	lministrator DATE 4-29-91	
TYPE OR PRINT NAME	Dorothy	Houghton			TELEPHONE NO. 915-682-37	
(Thus space for State Us	k.)				· · · · · · · · · · · · · · · · · · ·	
APPROVED BY	ach in	effice.	— т	LE	DATE	
CONDITIONS OF APPRO	VAL, IF ANY.	•				