

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.

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

LC 062178

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.)

7. Lease Name or Unit Agreement Name

Milnesand Unit

1. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

2. Name of Operator

Breck Operating Corp.

8. Well No.

197

3. Address of Operator

P. O. Box 911, Breckenridge, TX 76424

9. Pool name or Wildcat

Milnesand (San Andres)

4. Well Location

Unit Letter L : 1980 Feet From The South Line and 660 Feet From The West Line

Section

13

Township

8S

Range

34E

NMPM

Roosevelt

County

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

4279' (DF)

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

REMEDIAL WORK ☐

ALTERING CASING ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

PULL OR ALTER CASING ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

OTHER: Set CIBP & cmt ☒

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.

7/2/91: MIRU Ice Well Service. POOH & LD 177 3/4" rods & 157 jts
2-3/8" tbg. RDMO. MIRU WL Mast Unit. RIH w/ GR to 4500'.
Set 7-5/8" CIBP @ 4500'.

7/3/91: Dmp 8sx cmt on top of CIBP @ 4500'. RDMO.

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

SIGNATURE

Belinda Lawler

TITLE

Production Clerk

DATE

7-11-91

TYPE OR PRINT NAME

Belinda Lawler

(817) 559-3355
TELEPHONE NO

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT CLERK

APPROVED BY

TITLE

CONDITIONS OF APPROVAL IF ANY

JUL 18 1991
DATE