

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.
30-041-00186

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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 ☐

2. Name of Operator
Smith & Marrs Inc.

3. Address of Operator
Box 863 Kermit, TX 79745

4. Well Location

7. Lease Name or Unit Agreement Name
HAYES

8. Well No. **3**

9. Pool name or Wildcat
Allison - Penn

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

Section **29** Township **8 S** Range **37 E** NMPM **Roosevelt** County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4054' 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 ☐	OTHER: ☐	CASING TEST AND CEMENT JOB ☐	OTHER: ☐

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.

1. Set C10P@ 9500'-35' cmt on top - TAG
2. 25 sxs @ 7708-7608 (Abd)
3. Pull 8 5/8" casing @ Freeport Spot 35 sxs @ 50' in & 50' out stub & TAG
4. 45 sxs @ 8 7/8 shoe @ 4225-4125' - TAG
5. 35 sxs @ 2350-2250'
6. 35 sxs @ 420-320' - 13 3/8 shoe - TAG
7. 10 sxs @ Surface

THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE BEGINNING OF PLUGGING OPERATIONS FOR THE Casing TO BE APPROVED.

Install Dry Hole Marker - Cir. 9.5" MUD

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

SIGNATURE **[Signature]** TITLE **Pres.** DATE **10-29-01**
TYPE OR PRINT NAME **Rickey Smith** TELEPHONE NO. **915 586-3076**

(This space for State Use)

APPROVED BY _____ TITLE **ORIGINAL SIGNED BY** DATE **NOV 06 2001**
GARY W. WINK
CONDITIONS OF APPROVAL, IF ANY: **NATURAL SCIENCE MANAGER - 2**

dm