

xSubmit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
Revised March 25, 1999

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

WELL API NO. 30-041-00256
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> INJECTION	7. Lease Name or Unit Agreement Name: MILNESAND UNIT
2. Name of Operator J. CLEO THOMPSON	8. Well No. 59
3. Address of Operator 325 N. ST. PAUL. SUITE 4300. DALLAS. TX 75201	9. Pool name or Wildcat MILNESAND (SAN ANDRES)
4. Well Location Unit Letter <u>B</u> : 660 feet from the <u>NORTH</u> line and 1980 feet from the <u>EAST</u> line Section 13 Township 8S Range 34E NMPM County R00SEVELT	
10. Elevation (Show whether DR, RKB, RT, GR, etc.) 4260' GL	

11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> OTHER: REPAIR INJECTION WELL <input checked="" type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <input type="checkbox"/>

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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

- 1.) RU. POOH W/TBG & OLD PACKER. RIH W/BIT & SCRAPER TO BOTTOM & CLEAN OUT.
- 2.) RIH WITH PACKER AND PLUG TEST CSG. IF CSG NEEDS REPAIR & IF CEMENT SQUEEZING LOOKS DOUBTFUL TO REPAIR LEAK THEN:
- 3.) RIH W/2 7/8 X 4 1/2 PERMANENT PACKER WITH BLANKING PLUG AND SET @ 4470'.
- 4.) RIH W/2 7/8. 6.5#/FT J-55 & N-80 TBG WITH SEAL ASSY AND STINGER ON END.
- 5.) CIRCULATE 250 SX CLASS C CEMENT BETWEEN 2 7/8 AND 4 1/2 CASING & UPON FLUSHING LATCH 2 7/8 TBG IN PACKER.
- 6.) RIH W/2 1/16" X 2 7/8" INJECTION PACKER ON 2 1/16". PC TBG AND SET PACKER @ 4450'.
- 7.) CIRCULATE PACKER FLUID. SET PACKER. AND TEST ANNULUS TO 500 PSI. & RETURN WELL TO INJECTION. (4 1/2 9.5#@ 4697'. PERFS 4580-4623')

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

SIGNATURE J. Stevens TITLE ENGINEER DATE 10/06/00
Type or print name JIM STEVENS Telephone No. (915)366-8886

(This space for State use)

APPROVED BY _____ TITLE DISTRICT SUPERVISOR DATE OCT 12 2000
Conditions of approval, if any: