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NEW MEXICO OIL CONSERVATION COMMISSION

Form C-100
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.
E-10047

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Sunray Oil Company	8. Farm or Lease Name N.M. State "AY"
3. Address of Operator P.O. Box 128, Hobbs, New Mexico	9. Well No. 4
4. Location of Well UNIT LETTER J , 2110 FEET FROM THE South LINE AND 1980 FEET FROM THE East LINE, SECTION 36 TOWNSHIP 7 RANGE 35 NMPM.	10. Field and Pool, or Wildcat Undesignated
15. Elevation (Show whether DF, RT, GR, etc.) 4170 DF	12. County Roosevelt

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Completion Work

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. Drilled 7 7/8" hole to TD 4430'. Ran 4 1/2", 9.5#, J-55 csg. to csg. point 4423'. Cmt'd w/200 sx Incore Pos. WOC 24 hrs. tested csg. 1000#. 30 min. OK.
2. Perf 2 holes @ 4276, 4291, 4297, 4307, 4320 & 4324. Acidize perfs w/1250 gal. BDA.
3. Swab well to flow & potential test 209 BO & O BW in 24 hrs. 18/64" choke. T.P. 225#, GOR 750.

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

SIGNED B.F. Brawley **B.F. Brawley** TITLE District Engineer DATE 4-26-65

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: