

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. 30-005-21059
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. LG 4804
7. Lease Name or Unit Agreement Name STATE "24"
8. Well No. 1
9. Pool name or Wildcat CAPROCK, MORROW WEST

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	10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4409.1 GR
2. Name of Operator EP OPERATING COMPANY	
3. Address of Operator 6 DESTA DRIVE, SUITE 5250, MIDLAND, TX 79705-5510	
4. Well Location Unit Letter C : 660 Feet From The NORTH Line and 1980 Feet From The WEST Line Section 24 Township 12S Range 31E NMPM CHAVES County	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: ☐	PLUG AND ABANDONMENT ☒
	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.

PLUG #1 11/16/92 5-1/2 CIBP @ 9200 W/5 SX ON TOP EST TOC 9153
PLUG #2 11/17/92 25 SX @ 7320 EST TOC 7094
PLUG #3 11/17/92 25 SX @ 5065 EST TOC 4842
PLUG #4 11/18/92 40 SX @ 4250 EST TOC 4137 WOC 4 HRS TAG PLUG @ 4114 5-1/2 STUB @ 4200'
PLUG #5 11/18/92 60 SX 3685 EST TOC 3515 TAG PLUG 11/19/92 @ 3467
PLUG #6 11/19/92 50 SX @ 1550 EST TOC 1409 9-5/8 SHOE PLUG
PLUG #7 11/19/92 10 SX @ 31 CIRC TO SURFACE
INSTALL DRY HOLE MARKER 11/20/92

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

SIGNATURE S. D. Reed TITLE Production Superintendent DATE 12/8/92
TYPE OR PRINT NAME _____ TELEPHONE NO. _____

(This space for State Use)

APPROVED BY Lytle F. Truitt TITLE OIL & GAS INSPECTOR DATE JAN - 6 1993
CONDITIONS OF APPROVAL, IF ANY: