

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

2040 Pacheco St.
Santa Fe, NM 87505

WELL NO.
30-050-21101

Indicate Type of Lease

STATE _____ FEE ☒

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.)

Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

Name of Operator
Nearburg Producing Company

Well No.
1

Address of Operator
3300 N A St., Bldg 2, Suite 120, Midland, TX 79705

Pool name or Wildcat
Milnesand Penn West

Well Location

Unit Letter H : 1980 Feet From The North Line and 660 Feet From The East Line

Section 24 Township 8S Range 33E NMPM Chaves County

Elevation (Show whether DF, RKB, RT, GR, etc.)
4329' GR

11

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☒

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING

COMMENCE DRILLING OPNS. ☐

PLUG AND ANBANDONMENT

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

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 35 sx plug 5200' to 5000' (Top Glorietta 5143')
2. Set 35 sx plug 3270' to 3100' (Top Queen 3222')
3. Cut 5-1/2" csg @ 2600' and pull.
4. Spot 40 sx stub plug 50' in and 50' of stub (WOC Tag)
5. Spot 40 sx plug 405' to 275' (Base 13-3/8" @ 355')
6. Set surface plug 30' to surface
7. Set dry hole marker.

THE COMMISSION MUST BE NOTIFIED 24
HOURS PRIOR TO THE BEGINNING OF
PLUGGING OPERATIONS FOR THE C-103
TO BE APPROVED.

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

SIGNATURE

TITLE Production Analyst

DATE 07-26-00

TYPE OR PRINT NAME Sarah Jordan

TELEPHONE NO. 915/686-8235

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

IC

dp

