

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.

30-005-21119

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

Nearburg Producing Company

3. Address of Operator

P. O. Box 823085, Dallas, Texas 75382-3085

4. Well Location

Unit Letter H : 1,880 Feet From The north Line and 660 Feet From The east Line

Section 24

Township 8S

Range 33E

NMPM

Chaves

County

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

4,329' 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 ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Completion ☒

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.

12/06/93: MIRU well service unit. Installed tubing head and tested to 2,000 psi.

12/07/93: Drilled cement to DV tool @ 8,000'. Tested casing to 2,000 psi. Drilled cement and float collar to 9,218'. Ran GR/CLL/CNL log.

12/10/93: Perforate interval 9,190 - 9,198' with 4 JSPF.

12/11/93: Acidize interval 9,190 - 9,198' with 1,500 gals of 15% NEFE.

12/13-14/93: Ran production setting and rods.

12/23/93: Ran potential test.

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

SIGNATURE Judy Teames TITLE Production Secretary DATE 1/03/94

TYPE OR PRINT NAME Judy Teames TELEPHONE NO. 214-739-1778

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE JAN 07 1994

CONDITIONS OF APPROVAL, IF ANY: