

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.

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.)

7. Lease Name or Unit Agreement Name

Stevens

8. Well No.

6

9. Pool name or Wildcat

Saunders Permo Upper Penn

1. Type of Well:

OIL  
WELL

☒

GAS  
WELL

☐

OTHER

2. Name of Operator

Charles B. Gillespie, Jr.

3. Address of Operator

P. O. Box 8 Midland, Texas 79702

4. Well Location

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

Section 33 Township 14-S Range 33-E NMPM Lea County

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

4219 DF

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: ☐

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.

1. Set cast iron bridge plug above perforations at 9775'.  
Dump 4 sx cement on top of bridge plug, WOC.
2. Set 25 sx plug at 7700', across top of ABO.
3. Set 50 sx plug across liner top at 4014', Tag.
4. Cut off and pull 8 5/8" casing from approximately 2000'.
5. Set 25 sx plug across 8 5/8" casing stub.
6. Set 25 sx plug at 1600' across top of salt.
7. Set 25 sx plug at 294' across base of 13 3/8" casing shoe.
8. Set 10 sx plug at top of surface casing.
9. Weld 4" marker to surface pipe, and clean location.

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

SIGNATURE

*David W. Hastings*

TITLE

Production Manager

DATE 6/6/89

TYPE OR PRINT NAME

David W. Hastings

TELEPHONE NO 915-683-1765

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

JUN 7 1989