

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240DISTRICT II
P.O. Drawer DD, Artesia, NM 88210DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410OIL CONSERVATION DIVISION
2040 Pacheco St.
Santa Fe, NM 87505WELL API NO.
30-025-23839

5. Indicate Type of Lease

STATE ☐FEE ☒6. State Oil & Gas Lease No.
N/A

7. Lease Name or Unit Agreement Name

West Tres Papalotes Pen Unit

8. Well No.

29-1

291

9. Pool name or Wildcat

Tres Papalotes Penn 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 ☐

Unitized by R-9072

2. Name of Operator

Permian Resources, Inc. dba Permian Partners, Inc.

3. Address of Operator

P. O. Box 590 Midland, TX 79702

4. Well Location

Unit Letter L : 1980 Feet From The South Line and 660 Feet From The West LineSection 29 Township 14-S Range 34-E NMPM Lea County10. Elevation (Show whether DF, RKB, RT, GR, etc.)
4141 GL

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 CIBP @ 10,450' w/35' cmt. on top using wireline dumpbailer.
2. Displace well w/9.5 ppg. salt mud.
3. Spot 100' plug from 7000-6900'.
4. Cut 4-1/2 csg. @ 5500' and POH.
5. Spot 100' plug from 5500-5400' in csg. stub.
6. Spot 100' plug from 4400-4300' (8-5/8 shoe plug).
7. Cut 8-5/8 csg. @ 1500' and POH.
8. Spot 100' plug from 1500-1400' in csg. stub.
9. Spot 100' plug from 400-300' (12-3/4 surface shoe plug).
10. Spot 10 sxs. @ surface.
11. Weld on cap and dryhole marker.

THE COMMISSION MUST BE NOTIFIED 24
HOURS PRIOR TO THE PLUGGING OF
PLUGGING OPERATIONS FOR THE CHS
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 Manager

DATE

11/21/97

TYPE OR PRINT NAME

Randy Bruno

TELEPHONE NO. 915/685-0113

(This space for State Use) ORIGINAL SIGNED BY CHRIS WILLIAMS
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: