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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1

3a. Indicate Type of Lease
State ☒ Fee ☐
3. 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. OIL WELL ☒ GAS WELL ☐ OTHER ☐	7. Unit Agreement Name
2. Name of Operator Sun Exploration and Production Co.	8. Farm or Lease Name New Mexico JJ State
3. Address of Operator P.O. Box 1861, Midland, Texas 79702-1861	9. Well No. 3
4. Location of Well UNIT LETTER A 660 FEET FROM THE North LINE AND 800 FEET FROM THE East LINE, SECTION 23 TOWNSHIP 13 RANGE 32 NMPM.	10. Field and Pool, or Wildcat Baum (Upper Penn)
15. Elevation (Show whether DF, RT, GR, etc.)	12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☐

ALTERING CASING ☐
PLUG AND ABANDONMENT ☐

OTHER Acdz. ☒

17. 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.

NOTE: Hot oil tubing 2 days prior to MIRU.

- MIRU PU. POH w/rods & pump. NU BOP. Drop SV and pressure test tbg to 4000 psi, fish SV. Rise TAC and tag PBD, tally tag out of hole. GO to PRTD if necessary.
- RIH w/5 1/2" Baker RDG pkr & SN on 2-7/8" production tbg to ±9790. Load hole & break circulation w/2% KCL wtr. B.J.-Titan spot 2 bbls 15% NEFE HCL w/additives* from 9790 to 9704. Raise & set pkr at ±9650. Trap 1500 psi CP.
- B.J.-Titan acidize Penn perfs 9747-9790 w/4500 gals gelled 15% NEFE HCL w/additives* in 3 stages at 6 BPM. Est. WHTP 4000 psi. Max surf pressure 6500 psi. Pump schedule as follows:
A. Pump 1500 gals 15% gelled NEFE HCL
B. Pump 350 lbs. GRS in 250 GGSB + 30 1.3 sp. gr. RCN BS.
C. Repeat Steps A thru B once.
D. Pump 1500 gals 15% gelled NEFE HCL.
E. Flush to btm perf w/2500 gals 2% KCL wtr.

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

SIGNED Dee Ann Kemp

TITLE Associate Accountant

DATE 3-7-86

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT 1 SUPERVISOR

APPROVED BY

TITLE

DATE

MAR 11 1986

CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
MAR 10 1986
O.C.D.
HOBBS OFFICE