

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. 30-025-33922
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. VA 998
7. Lease Name or Unit Agreement Name ESTACADO 27 STATE
8. Well No. 2
9. Pool name or Wildcat WILDCAT
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4104' GR

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 RAND PAULSON OIL COMPANY, INC.
3. Address of Operator 508 W. WALL, STE 100 MIDLAND, TX 79701
4. Well Location Unit Letter G : 2040 Feet From The NORTH Line and 2040 Feet From The EAST Line Section 27 Township 14 S Range 34 E NMPM LEA County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4104' GR

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: ☐	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.

5-30-97 MIRU SERVICE UNIT. RAN GR, CLL & CBL. PERFORATED 10,457' TO 10,514'. TOTAL 56 HOLES. ACIDIZED W/3750 GALS 15% MSR ACID. REC WATER W/SLIGHT SHOW OIL. SET CLBP 10,450' & CAP W/ 20' CEMENT. PERFORATED 10,392'-10,398'. TOTAL 12 HOLES. ACIDIZED W/250 GALS 15% MSR. UNABLE TO PUMP INTO ZONE @ 4750 PSI FOR 2 1/2 HRS. RELEASED PACKER - LEFT SWINGING. SUSPENDED OPERATIONS PENDING FURTHER DECISIONS. RELEASED UNIT. WELL SI 6-9-97.

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

SIGNATURE **O. H. Routh** TITLE **AGENT** DATE **6-11-97**

TYPE OR PRINT NAME **O. H. ROUTH** TELEPHONE NO. **915-687-0323**

(This space for State Use)

APPROVED BY **Paul Routh** TITLE **Geologist** DATE **6-11-97**

CONDITIONS OF APPROVAL, IF ANY: