

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.

30-041-20582

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

EP Operating Company

3. Address of Operator

6 Desta Drive, Suite 5250, Midland, TX 79705-5510

4. Well Location

Unit Letter C : 660 Feet From The North Line and 1980 Feet From The West Line

Section 21 Township 4S Range 33E NMPM Roosevelt County

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

4353' 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: ☐

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.

Proposed plugging procedure to commence approximately 10/8/90:

Retainer previously set at 6035' and squeezed w/150 sacks cement.

Lay 15 sack cement plug from 2900'-3000'.

Perforate 5½" casing at 2030'. Set retainer at 1980'. Squeeze w/75 sacks.

Dump 35' of cement on top of retainer.

Cut off wellhead.

Lay 10 sack plug from 30' to surface.

Install dry hole marker.

9.5# mud-laden fluid between all plugs.

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

SIGNATURE A. D. [Signature] TITLE Production Superintendent DATE 9/14/90

TYPE OR PRINT NAME _____ TELEPHONE NO. _____

(This space for State Use)

APPROVED BY [Signature] TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

THE COMMISSION MUST BE NOTIFIED 24
HOURS PRIOR TO THE BEGINNING OF
PLUGGING OPERATIONS FOR THE C-103
TO BE APPROVED.