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## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office

DISTRICT I OIL CONSERVATION DIVISION P.O. Box 1980, Hobbs, NM 88240 WELL API NO. P.O. Box 2088 30-025-01226 **DISTRICT II** Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210 Indicate Type of Lease STATE X FEE 1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. E-2116 SUNDRY NOTICES AND REPORTS ON WELLS ( DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well: State F  $\mathbf{x}\mathbf{x}$ WELL WELL OTHER 2. Name of Operator 8. Well No. CHARLES B GILLESPIE JR. 3. Address of Operator 9. Pool name or Wildcat P.O. BOX 8 Midland, Tx. Saunder Permo Upper Penn 4. Well Location 660 Unit Letter \_ Feet From The South Line and 660 Feet From The \_\_East Section Township 15-S 35~E Lea N.M. Range **NMPM** County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4214 DF Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK \_PLUG AND ABANDON REMEDIAL WORK **ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS** COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT **PULL OR ALTER CASING** CASING TEST AND CEMENT JOB OTHER: 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 5½ cement retainer @ 4854', squeezed w/400 sacks cement @ 800 psi shut in, spot 25 saCks cement on top of cement retainer (2) Load hole w/mud (3) Cut & pull 5½ casing @ 4089' (4) Spot 40 sacks cement plug @ 5½ stub 4280', W.O.C. Tag cement top @ 4019' (5) Perforate 8 5/8 casing @ 330' (6) Squeeze 330' perforations w/75 sacks cement @ 1500 psi, W.O.C. tag cement top @220' (7) Spot 15 sacks cement @ surface & set P&A marker I hereby certify that the information above is true and complete to the best of my knowledge and belief. TELEPHONE NO

TYPE OR PRINT NAME (This space for State Use CONDITIONS OF APPROVAL, IF ANY: