

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

DISTRICT 1  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT 2  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT 3  
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.	30-025-01431
5. Indicate Type of Lease	State
6. State Oil & Gas Lease No.	B-2148
7. Lease Name or Unit Agreement Name	Shahara State Unit
8. Well No.	4
9. Pool name or Wildcat	Maljamar Grayburg San Andres

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  
Shahara Oil, LLC

3. Address of Operator  
207 W. McKay, Carlsbad, NM 88220 505/885-5433

4. Well Location  
Unit Letter C 660 Feet From The North Line and 1980 Feet From The West Line  
Section 16 Township 17S Range 33E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
4183 GR

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.

03/24/98-03/30/98 POH w/ tbg, rods and pump. TIH w/5 1/2" bit and scraper to 4419'.  
Ran GR-CCL 4000'-4419', perf 7 holes form 4348'-4361'.  
Acidized perfs 4270'-4428' w/ 1500gal 15% NEFE.  
Ran 5 1/2" 17# AD1 injection packer and 130 jts plastic coated 2 3/8" tbg, set packer at 4163' and tested csg to 450 psi for 30min. held good.  
See attached CIT Chart dated 3/30/98.

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

SIGNATURE Perry L. Hughes TITLE President DATE 08/25/98  
TYPE OR PRINT NAME Perry L. Hughes TELEPHONE NO. 505-885-5433

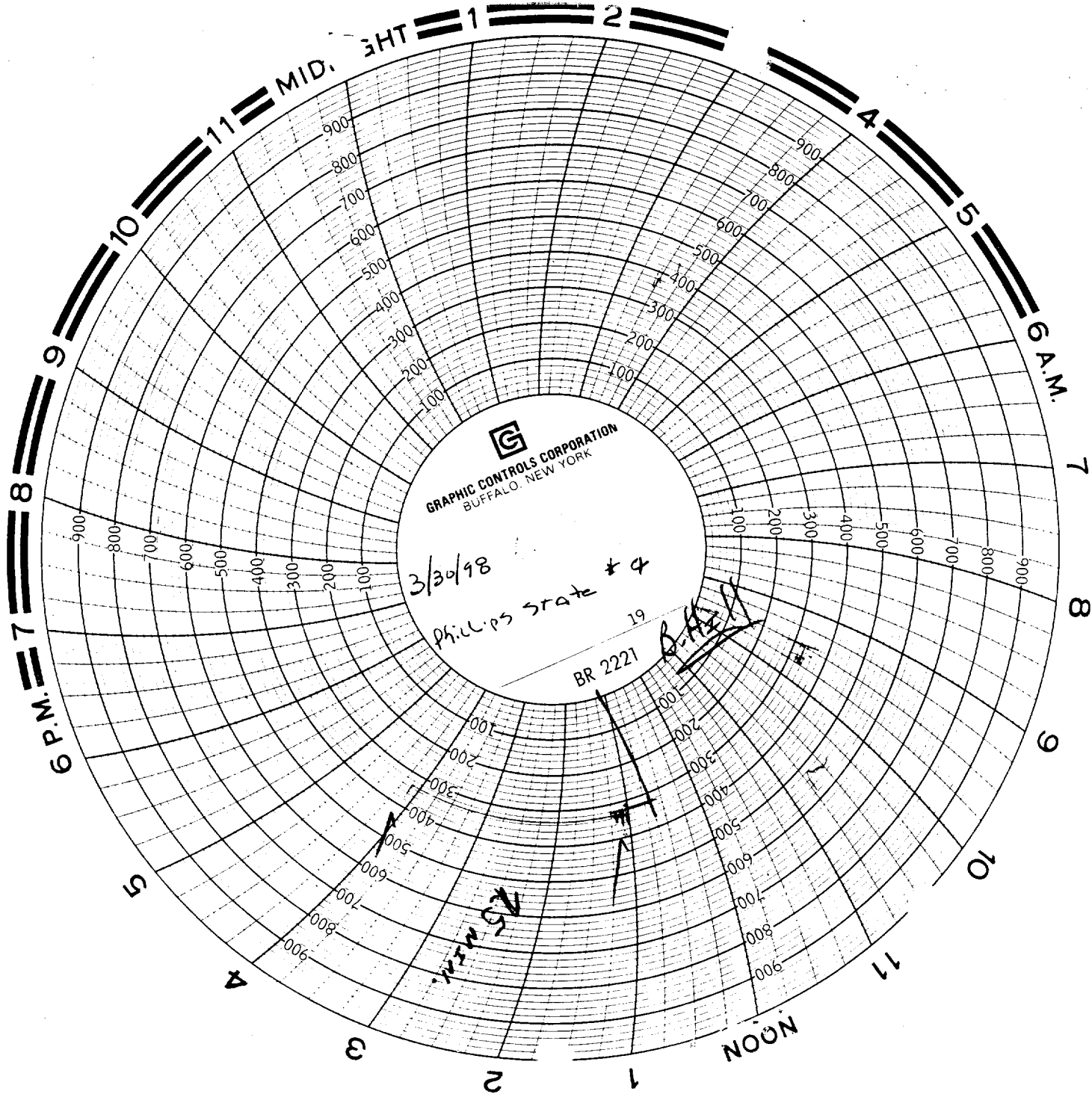
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APPROVED BY WILLIAMS TITLE DISTRICT SUPERVISOR DATE DEC 21 1998

CONDITIONS OF APPROVAL IF ANY:

JCSN

dp



GRAPHIC CONTROLS CORPORATION  
BUFFALO, NEW YORK

3/30/98

Phillips State #4

BR 2221

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NS min.