

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.  
3002505136 30-025-05129

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  
S & J OPERATING COMPANY

3. Address of Operator  
P.O. BOX 2249, WICHITA FALLS, TEXAS 76307-2249

7. Lease Name or Unit Agreement Name  
(8910087370)  
DENTON NORTH WOLFCAMP UNIT  
TRACT 14

8. Well No.  
2

9. Pool name or Wildcat  
DENTON WOLFCAMP

4. Well Location  
Unit Letter C : 660 Feet From The NORTH Line and 1980 Feet From The WEST Line

Section 26 (NENW) Township 14-S Range 37-E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
3828 DF

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. Last Prod 11-91

SHUT IN PRODUCING WELL, AS OF 4-1-93. On 12-13-91 spotted 50 sacks of cement at 9260'. After 2 1/2 hours tagged top of cement plug at 8719'.

Procedure for obtaining temporarily abandoned status:

1. Pressure test casing to 500 psig for 30 minutes with a pressure drop of not more than 10% for 30 minutes.

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

SIGNATURE  TITLE Manager of Operations

DATE 3-17-93

TYPE OR PRINT NAME PEYTON S. CARNES, JR.

TELEPHONE NO. (817) 723-2166

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

MAR 23 1993

RECEIVED

MAR 24 1993

OCD HOBBS OFFICE