

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240DISTRICT II
P.O. Drawer DD, Artesia, NM 88210DISTRICT III
1000 Rio Braco Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

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

WELL API NO.

3002505130 30-025-05137

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

4. Well Location

Unit Letter C : 2145 Feet From The NORTH Line and 2145 Feet From The EAST Line

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

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

3813 GR

7. Lease Name or Unit Agreement Name

(8910087370)

DENTON NORTH WOLFCAMP UNIT
TRACT 15

8. Well No.

3

9. Pool name or Wildcat

DENTON WOLFCAMP

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 11-88

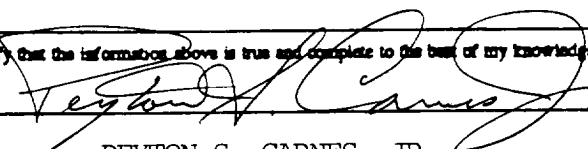
SHUT IN PRODUCING WELL AS OF 4-1-93. On 3-30-92 set CIBP at 8688' and
dumped 35' of cement on CIBP. Circulated with salt water treated with
corrosion inhibitor.

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.

(817) 723-2166

TELEPHONE NO.

ORIGINAL FILED BY JERRY SEXTON

(This space for State Use)

SUPERVISOR

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

MAR 23 1993

RECEIVED

MAR 2 9 1993

CCD HOBBS OFFICE