

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 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.

30-025-05269

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Pacific Royalty Co

8. Well No.

3

9. Pool name or Wildcat

Denton (Wolfcamp)

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

Polaris Production Corp.

3. Address of Operator

415 W. Wall Suite 2010 Midland, TX 79702

4. Well Location

Unit Letter

A

430

Feet From The North

Line and

330

Feet From The

East

Line

Section

10

Township

15S

Range

37E

NMPM

Lea

County

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

3813

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.

3-21-96 (1) Circ. hole 10# SWG

(2) 9100-8848' 25sx. 14.8# Class "C"

(TAG W/TBG. 8973')

3-25-96 (3) 4850'-4674' 45sx. 14.8# Class "C"

(TAG W/TBG. 4685')

(4) 400'-223' 45sx. 14.8# Class "C"

(5) 30-3' 15sx. 14.8# Class "C"

(6) Install dryhole marker

Approved as to plugging of the Well Bore.
Liability under bond is retained until
surface restoration is completed.

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

SIGNATURE

Frelan Fields

TITLE

Agent

DATE

4/4/96

TYPE OR PRINT NAME

Frelan Fields

(915)

TELEPHONE NO. 366-1852

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

OC FIELD REPRESENTATIVE II/STAFF MANAGER

JAN 16 2003

