

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.

30-025-27611

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

LG-1370

7. Lease Name or Unit Agreement Name

State P.H.

8. Well No.

1

9. Pool name or Wildcat

Dean Permo Penn

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

ELK OIL COMPANY

3. Address of Operator

Post Office Box 310, Roswell, New Mexico 88202-0310

4. Well Location

Unit Letter P : 660 Feet From The South Line and 660 Feet From The East Line

Section 26

Township 15S

Range 36E

NMPM

Lea

County

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

3858' GR

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

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.

Plan to plug and abandon well as follows:

- (1) Set CIBP at 10,550' with 35' cement.
- (2) Cut and recover 9000' of 5½" casing.
- (3) Set 100' plug at 9000' (50 in / 50 out).
- (4) Set 100' plug at 7000'.
- (5) Set 100' plug at 4729' (8 5/8 shoe).
- (6) Cut and recover 1800' of 8 5/8" casing.
- (7) Set 100' plug at 1800' (50 in / 50 out).
- (8) Set 10 sxs surface plug.

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

SIGNATURE  TITLE President

DATE May 13, 1997

TYPE OR PRINT NAME Joseph J. Kelly

TELEPHONE NO. 505/623-3190

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

MAY 14 1997

APPROVED BY DISTRICT I SUPERVISOR

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: