

STATE OF NEW MEXICO
AND MINERALS DEPARTMENT

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U.S.G.S.	
LAND OFFICE	
OPERATOR	

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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.)

OIL
WELL ☒

GAS
WELL ☐

OTHER-

2. Name of Operator

DINERO OPERATING COMPANY

3. Address of Operator

P. O. DRAWER 10505, MIDLAND, TEXAS 79702

4. Location of Well

UNIT LETTER C . 1980 FEET FROM THE West LINE AND 660 FEET FROM
THE North LINE, SECTION 32 TOWNSHIP 15-S RANGE 33-E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)

G.L. 4203.5

5a. Indicate Type of Lease

State ☒

Fee ☐

5. State Oil & Gas Lease No.

LG2251

7. Unit Agreement Name

8. Farm or Lease Name

DINERO LEA VP STATE

9. Well No.

1

10. Field and Pool, or Wildcat

WILDCAT (SANDERS)

12. County

LEA

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

COMMENCE DRILLING OPS. ☐

CASING TEST AND CEMENT JOBS ☐

OTHER Run and cement 8 5/8" casing ☒

ALTERING CASING ☐

PLUG AND ABANDONMENT ☐

17. 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.

10/20/84: Drilled an 11" hole to a depth of 4428'. Ran 4432' of 8 5/8"-J-55, 32.28.24# casing. (108 joints) Cemented with 1660 sacks of Class 3 HE Lite Weight cement, with 1/4# B29-9# SKD 44, and 200 sacks HE. Circ. 252 sacks cement to pit. WOC for 18 hours.

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

SIGNED Laverda Norman

TITLE Production Supervisor

DATE 10/25/84

Eddie W. Sedy

APPROVED BY Oil & Gas Inspector

TITLE

OCT 29 1984

CONDITIONS OF APPROVAL, IF ANY: