

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
310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

WELL API NO.
30-025-30498

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
E-9118, V-122

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
Amerind Oil Company Limited Partnership

3. Address of Operator
415 W Wall Suite 500, Midland, Texas 79701

4. Well Location
Unit Letter E : 810 Feet From The West Line and 1980 Feet From The North Line
Section 29 Township 16S Range 37E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3810' GL

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: Casing Cement Squeeze ☒

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.

10/8 - 10/14/92

POOH w/prod equipment. TIH w/RBP & set @ 9727'. Loaded w/2% KCl wtr. Tested csg & BU to 500 psig. Perf 5-1/2" cg @ 5920'. TIH w/5-1/2" RTTS treating pkr to 5165'. Displaced annulus w/pkr fluid. Squeezed w/250 sx Cls "C" cmt w/2% CaCl₂, good standing 2000 psig squeeze. Tagged cmt @ 5790'. Drld solid cmt to 5925' (135') w/stringers to 5935'. Tested to 500 psig. Rec BP. TIH w/prod equipment (no change).

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

SIGNATURE James E. Yeley TITLE Agent DATE October 19, 1992

TYPE OR PRINT NAME James E. Yeley TELEPHONE NO. 915/682-8217

(This space for State Use)

Orig. Signed by
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____ DATE OCT 21 '92

CONDITIONS OF APPROVAL, IF ANY: