

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. 30-025-31226
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name McMillan "34"
8. Well No. 1
9. Pool name or Wildcat Wildcat
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3760 Ground

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER
2. Name of Operator Columbia Gas Development Corporation
3. Address of Operator P. O. Box 1350, Houston, TX 77251-1350
4. Well Location Unit Letter C : 400' Feet From The North Line and 1980 Feet From The West Line Section 34 Township 14S Range 38E NMPM Lea County

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: <input type="checkbox"/>

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.

12/31/91 - Surface Casing:

Set 13-3/8", 48#, H-40 @ 492'. Cemented w/Dowell 532 sks Class "C" cmt. WOC 24 hrs. Test csg to 1000# psi for 1 hr, test okay.

1/10/92 - Intermediate Casing:

Set 8-5/8", K-55, 32# csg @ 4882' w/2113sks Class "C" Neat. Tested to 1000# for 30 minutes, test okay. Temperature log run to 4882'. Verbal notification made on 1/9/92 to Bonnie @ 9:00am.

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

SIGNATURE Wendy G. DesOrmeaux TITLE Regulatory Coordinator DATE 1/30/92
Wendy G. DesOrmeaux (713)
TYPE OR PRINT NAME TELEPHONE NO. 871-3482

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT I SUPERVISOR TITLE DATE

CONDITIONS OF APPROVAL, IF ANY: