

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. 30-025-32875

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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
AnSon Gas Corporation

3. Address of Operator
P.O. Box 24060 Oklahoma City, OK 73124

4. Well Location
Unit Letter C : 1100 Feet From The North Line and 2550 Feet From The West Line
Section 33 Township 16S Range 38E NMPM Lea County

7. Lease Name or Unit Agreement Name

Mary 33

8. Well No. #1

9. Pool name or Wildcat
Strawn Lime/Atoka

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3710' GR

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: Sidetrack and Deepen Well ☒

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.

Drilled to TD of 11,500'. After logging, it has been determined that the Strawn lime is commercially unproductive. AnSon desires to plug back to a depth of approximately 9,600 feet so as to sidetrack the Mary 33 #1 to a bottomhole location of approximately 1,100 feet FNL and 2,550 feet FWL of Section 33 to test the Devonian formation at an approximate depth of 13,300 feet.

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

SIGNATURE Scott J. Keck TITLE Production Manager DATE 6/2/95
(405)
TYPE OR PRINT NAME Scott J. Keck TELEPHONE NO. 528-0525

(This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT SUPERVISOR

JUN 07 1995

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

029 14 WIL

17 10/4

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OFFICE