

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
811 South 1st St, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

WELL API NO.

30-025-33733

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.)

7. Lease Name or Unit Agreement Name

Grasslands "27"

8. Well No.

#1

9. Pool name or Wildcat

Wildcat - Devonian

1. Type of Well:

OIL WELL ☐

GAS WELL ☒

OTHER ☐

2. Name of Operator

Nearburg Producing Company

3. Address of Operator

3300 North "A", Bldg 2, Ste 120, Midland, TX 79705

4. Well Location

Unit Letter P 1,243' : Feet From The South Line and 353' Feet From The East Line

Section 27 Township 15S Range 34E NMPM Lea County

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

4,071' 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 & ABANDONMENT ☐

PULL OR ALTER CASING ☐

CASING TEST & CEMENT JOB ☐

OTHER: _____

OTHER: Surface casing and cement

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 463'. C&C hole. RU and run 11 jts 13-3/8" 48# H40 STC csg. Set casing at 463'. C&C hole. Cement casing using 435 sx cement plus additives. Circ 10 sx cement to pits. WOC for 18 hrs. Cut off casing and weld on wellhead. NU BOPE and test.

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

SIGNATURE

TITLE Mgr of Drilling and Production

DATE 06/15/97

TYPE OR PRINT NAME E. Scott Kimbrough

TELEPHONE 915/686-8235

(This space for State Use)

ORIGINAL SENT TO DISTRICT SUPERVISOR

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY: