Digitar   Digi	Submit 3 Copies To Appropriate D	istrict State	e of New M	exico		Form C-103	3
Less French Dr. Bobbs. M. ME212   DIL CONSERVATION DIVISION   Dataset IV   Datase							
SIL South Field, Acress and MS 2710  DOR DESTRUCTION DIVISION  Santa Fe, NM 87505  SUNDRY NOTICES, AND REPORTS ON WELLS  SUNDRY NOTICES, AND REPORTS ON WELLS  SUNDRY NOTICES, AND REPORTS ON WELLS  SUNDRY NOTICES AND REPORTS ON WELLS  ON NOT USE THIS PORT FOR REPORTS ON WELLS  I. Type of Well:  3. Address of Operator  10. Events Note 1609, Houston, Texas 77002  4. Well Location  Until Letter K   1721'   feet from the South line and 1999' feet from the West line  Section 10 Township 165 Range 35E NMPM Lea County  10. Elevation (Show whether DR, RKB, RT, CR, etc.)  NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK   PLUG AND ASANDON   REMEDIAL WORK   PLUG AND ASANDON   CASING TEST AND ASANDON   ASANDON   CASING TEST AND ASANDON   ASANDON   ASANDON   CASING TEST AND ASANDON   ASAN		240				5-34400	_
District		OIL CONS	OIL CONSERVATION DIVISION				
Solution	District III	204					
Sudder Notices and Reports on Wells   Sudder Notices and Reports on Wells   Sudder Notices and Reports on Wells   Sudder Notices and Reports and Reports on Reports		/41()				as Lease No.	
SUNDRY NOTICES AND REPORTS ON WELLS DO NOT HIST THIS PORM FOR PROPOSALS TO DEPORTS ON WELLS PROPOSALS TO THE PORT OF PERMIT (FORM C-101) FOR SUCH PROPOSALS) 1. Type of Well:		87505		7303	23303		
Type of Well: Oil Well   Oil	SUNDRY (DO NOT USE THIS FORM FOR DIFFERENT RESERVOIR, USE	NOTICES AND REPORT PROPOSALS TO DRILL OR TO	DEEPEN OR PI	LIG BACK TO A			-
Oil Well   Gas Well   Other   S. Well No.   1-Y   9. Pool name or Wildent   1-Y	PROPOSALS.)		,		Carlisie State Co	om.	
2. Name of Operator  3. Address of Operator  1001 Famin, Suite 1600, Houston, Texas 77002  4. Well Location  Unit Letter K   1721'   feet from the   South   line and   1909'   feet from the   West   line    Section   10   Township   15S   Range   3SE   NMPM   Lea   County    Gra 3998'   11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data   NOTICE OF INTENTION TO:   REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING    TEMPORARILY ABANDON   CHANGE PLANS   COMMENCE DRILLING OPNS.   PLUG AND ABANDONMENT   COMMENCE DRILLING OPNS.   PLUG AND ABANDONMENT   CASING TEST AND   CHANGE PLANS   COMMENCE DRILLING OPNS.   PLUG AND ABANDONMENT   COMMENCE DRILLING OPNS.   PLUG AND ABANDONMENT   CASING TEST AND   CHANGE PLANS   COMMENCE DRILLING OPNS.   PLUG AND ABANDONMENT   COMMENCE DRILLING OPNS.   PLUG AND   ABANDONMENT   CASING TEST AND   CHANGE PLANS   COMMENCE DRILLING OPNS.   PLUG AND   CASING TEST AND   CHANGE PLANS   COMMENCE DRILLING OPNS.   PLUG AND   CASING TEST AND   CHANGE PLANS   COMMENCE DRILLING OPNS.   PLUG AND   CASING TEST AND   CHANGE PLANS   COMMENCE DRILLING OPNS.   PLUG AND   CASING TEST AND   CHANGE PLANS   COMMENCE DRILLING OPNS.   PLUG AND   CASING TEST AND   CHANGE PLANS   COMMENCE DRILLING OPNS.   PLUG AND   CASING TEST AND   CHANGE PLANS   COMMENCE DRILLING OPNS.   PLUG AND   CASING TEST AND   CASING TES		7-11 <b>5</b> 7 0-1					
Ocean Energy, Inc.   1.Y   1.   1.   1.   1.   1.   1.		ell 🔼 Other					
3. Address of Operator    1001 Fannin, Suite 1600, Houston, Texas 77002							
100   Fannin, Suite 1600, Houston, Texas 77002						Wildon	_
4. Well Location Unit Letter K : 1721' feet from the South line and 1909' feet from the West line Section 10 Township 16S Range 35E NMPM Lea County  10. Elevation (Show whether DR, RRB, RT, GR, etc.) CR 3998'  11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING   TEMPORARILY ABANDON   CHANGE PLANS   COMMENCE DRILLING OPNS.   PLUG AND   PULL OR ALTER CASING   MULTIPLE   CASING TEST AND   CEMENT JOB   OTHER:   OTHER: Recompletion to Atoka   MULTIPLE   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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.  10. Blanked off Morrow w/CIBP @ 12,010' w/35' cmt on top. Perf'd Fat Lady Atoka 11710-14 & 11725-27' and Upper Atoka 11,572-74' & 11,577-93' using 2-1/8" thru tbg strip gun loaded 6 SPF. Swbd well in.  Acidized well and put on line.  1 hereby certify tharthe patormation above is true and complete to the best of my knowledge and beinef.  SIGNATURE   Lawrence   DATE   8/22/01   Type or print gapte   Jeanie McMillan   TITLE   Regulatory Specialist   DATE   8/22/01   Type or print gapte   Jeanie McMillan   Telephone No. (713) 265-6834; fax (713) 265-68086   This space for State use)		ouston, Texas 77002			1. 1.000	whocat	ĺ
Section 10 Township 168 Range 35E NMPM Lea County    10. Elevation (Show whether DR. RKB, RT, GR. etc.)	4. Well Location				rttoka		$\dashv$
10. Elevation (Show whether DR, RKB, RT, GR, etc.)   GR 3998'     11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO:   SUBSEQUENT REPORT OF:   ALTERING CASING     PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING     TEMPORARILY ABANDON   CHANGE PLANS   COMMENCE DRILLING OPNS.   PLUG AND ABANDONMENT     PULL OR ALTER CASING   MULTIPLE   COMPLETION   CEMENT JOB     OTHER:   OTHER: Recompletion to Atoka   MILTIPLE   COMPLETION   CEMENT JOB     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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.    O5/2001   Blanked off Morrow w/CIBP @ 12.010' w/35' cmt on top. Perf'd Fat Lady Atoka 11710-14 & 11725-27' and Upper Atoka 11,572-74' & 11,577-93' using 2-1/8" thru they strip gun loaded 6 SPF. Swbd well in. Acidized well and put on line.    Ihereby certify that the information above is true and complete to the best of my knowledge and belief.	Unit Letter K : 172	feet from the Sou	uth line ar	id <u>1909'</u> f	eet from the W	est line	
10.   Elevation (Show whether DR, RKB, RT, GR, etc.)   GR 3998'	Section 10	Townsh	ip <b>16S</b>	Range 35E	NMPM	Lea County	
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING    TEMPORARILY ABANDON   CHANGE PLANS   COMMENCE DRILLING OPNS.   PLUG AND ABANDONMENT    PULL OR ALTER CASING   MULTIPLE   COMPLETION   CASING TEST AND   CEMENT JOB    OTHER:   OTHER: Recompletion to Atoka   MULTIPLE    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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.  D5/2001   Blanked off Morrow w/CIBP @ 12,010* w/35* cmt on top. Perf'd Fat Lady Atoka 11710-14 & 11725-27* and Upper Atoka 11,572-74* & 11,577-93* using 2-1/8" thru tbg strip gun loaded 6 SPF. Swbd well in. Acidized well and put on line.  Thereby certify that The Information above is true and complete to the best of my knowledge and belief.  SIGNATURE   Lawre   Multiple   Lamie McMillan   TITLE   Regulatory Specialist   DATE   8/22/01   Type or print tagrie   Jeanie McMillan   Telephone No. (713) 265-8086    APPPROVED BY   TITLE   DATE   2.1 2009.		GR 3998'		R, RKB, RT, GR, etc	.)	and the second	
PERFORM REMEDIAL WORK  PLUG AND ABANDON  REMEDIAL WORK  ALTERING CASING   TEMPORARILY ABANDON  CHANGE PLANS  COMMENCE DRILLING OPNS.  PLUG AND ABANDONMENT   PULL OR ALTER CASING  MULTIPLE  COMPLETION  CEMENT JOB   OTHER:  COMPLETION  CEMENT JOB   OTHER:  COMPLETION  CEMENT JOB   OTHER:  Recompletion to Atoka    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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.  05/2001  Blanked off Morrow w/CIBP @ 12,010' w/35' cmt on top. Perf'd Fat Lady Atoka 11710-14 & 11725-27' and Upper Atoka 11,572-74' & 11,577-93' using 2-1/8" thru tbg strip gun loaded 6 SPF. Swbd well in.   Acidized well and put on line.	11. Che	eck Appropriate Box to	Indicate N	ature of Notice, I	Report or Other	Data	
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OTHER:    OTHER: Recompletion to Atoka   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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.    OF   OTHER: Recompletion to Atoka   Describe proposed or completed operations.   OTHER: Recompletion to Atoka   Describe proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.    OF   OTHER: Recompletion to Atoka   Description   OTHER: Recompletion or recompilation.   OTHER: Recompletion or recompilation.   OTHER: Recompletion or recompilation.   OTHER: Recompletion to Atoka   Description   OTHER: Recompletion or recompilation.   OTHER: Recompletion or recompilation.   OTHER: Recompletion to Atoka   OTHER: Recompletion or recompilation.   OTHER: Recompletion to Atoka   OTHER: Recompletion or recompilation.   OTHER: Recompletion to Atoka   OTHER: Recompletion or recompletion or recompilation.   OTHER: Recompletion to Atoka   OTHER: Recompletion or recompletion or recompilation.   OTHER: Recompletion   OTHER: Recompleti	<u>_</u>			ABANDONMENT			
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Upper Atoka 11,572-74 & 11,577-93' using 2-1/8" thru tbg strip gun loaded 6 SPF. Swbd well in.  Thereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNATURE TITLE Regulatory Specialist DATE 8/22/01  Type or print pane Jeanie McMillan Telephone No. (713) 265-6834; fax (713) 265-8086  APPPROVED BY TITLE DATE 12 2 2 2 2006	•						
I hereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNATURE   Lance   McMillan   TITLE   Regulatory Specialist   DATE   8/22/01    Type or print name   Jeanie McMillan   Telephone No. (713) 265-6834; fax (713) 265-8086  (This space for State use)  APPPROVED BY   TITLE   DATE   12.008	Upper Atok	a 11,5/2-/4 & 11,5//-93	)' w/35' cmt o using 2-1/8"	n top. Perf'd Fat L thru tbg strip gun lo	ady Atoka 11710-1 paded 6 SPF. Swb	4 & 11725-27' and od well in.	
SIGNATURE McMillan TITLE Regulatory Specialist DATE 8/22/01  Type or print gaple Jeanie McMillan Telephone No. (713) 265-6834; fax (713) 265-8086  (This space for State use)  APPPROVED BY TITLE DATE 12006	Acidized w	en and put on line.					
SIGNATURE McMillan TITLE Regulatory Specialist DATE 8/22/01  Type or print gaple Jeanie McMillan Telephone No. (713) 265-6834; fax (713) 265-8086  (This space for State use)  APPPROVED BY TITLE DATE 12006							
SIGNATURE   TITLE   Regulatory Specialist   DATE   8/22/01    Type or print game   Jeanie McMillan   Telephone No. (713) 265-6834; fax (713) 265-8086    (This space for State use)  APPPROVED BY   TITLE   DATE   1/20/01    DATE   1/20/01   1/20/01							
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Type or print name Jeanie McMillan Telephone No. (713) 265-6834; fax (713) 265-8086  (This space for State use)  APPPROVED BY TITLE DATE, up. 2, 1, 2006	( ) .	00					
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