

**DISTRICT I**

P. O. Box 1980, Hobbs, NM 88240

**OIL CONSERVATION DIVISION**

2040 South Pacheco  
Santa Fe, New Mexico 86595

**DISTRICT II**

P. O. Drawer DD, Artesia, NM 88210

**DISTRICT III**

1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.

30-025-35297 **35257**

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  
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

TMBR/Sharp Drilling, Inc.

3. Address of Operator

P. O. Drawer 10970, Midland, TX 79702

4. Well Location

Unit Letter **M** : **660** Feet From The **West** Line and **760** Feet From The **South**

Section **24** Township **16S** Range **35E** NMPM County **Lea**

10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
**3964' 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: ☐

**SUBSEQUENT REPORT OF:**

REMEDIAL WORK ☒ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDON ☐  
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.

07/03/01 SITP 4190 psi. RU BJ Coil Tech. GIH w/coil tbg to bottom perms. Pump 1250 gals 15% NEFE acid. Close annulus. Displace acid w/N2 @ 1 BPM, 1900 psi. POOH w/coil tbg. SITP 4400 psi. Open well on '14/64" choke. Flow back load.

07/11/01 SITP 4430 psi. Run 4 pt survey as follows:

Rate	Choke	TP	BO	MCF
1	3/64	4200	15	936
2	5/64	3900	15	1400
3	6/64	3645	3	1700
4	8/64	3210	5	2300

POOH w/BHP bombs. Shut well in. WO pipeline.

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

SIGNATURE

*Lonnie Arnold*

TITLE

Production Manager

DATE

08/06/01

TYPE OR PRINT NAME

Lonnie Arnold

TELEPHONE NO.

(915) 699-5050

(This space for State Use)

APPROVED BY

TITLE

Signed by  
*Paul Kautz*  
Geologist

DATE

AUG 18 2001

CONDITIONS OF APPROVAL, IF ANY: