

Submit 3 copies to Appropriate District Office

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103

Revised March 25, 1999

District I

1625 N. French Dr., Hobbs, NM 88240

District II

811 South First, Artesia, NM 87210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM 87505

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO.

30-025-35808

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

V-5099

7. Lease Name or Unit Agreement Name:

DeGas "6" State Com.

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

KUKUI Operating Company

8. Well No.

1

3. Address of Operator

**203 W. Wall Street, Suite 810
Midland, TX 79701**

9. Pool name or Wildcat

Eidson Morrow North Gas

4. Well Location

Unit Letter **Lot 8/G** ; **800'** feet from the **East** line and **1980'** feet from the **North** line

Section **6** Township **16S** Range **35E** NMPM County **Lea**

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

4,053' 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 ☐

MULTIPLE COMPLETION ☐

OTHER: **Notice of initial sales to pipeline** ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

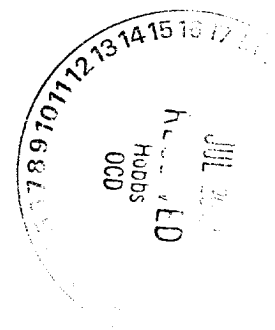
PLUG AND ABANDONMENT ☐

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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

07/16/02 1st day of production to sales line.



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

SIGNATURE

Larry K. Strider

TITLE

Western District Manager

DATE **07/22/02**

Type or print name

Larry K. Strider

Telephone No. **915-687-6200**

(This space for State use)

APPROVED BY

Conditions of approval, if any:

ORIGINAL SIGNED BY

GARY W. WINK

TITLE

OC FIELD REPRESENTATIVE II/STAFF MANAGER

JUL 24 2002

DATE