

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 APT. NO. <u>01541</u> <u>30-025-015400-S1</u>
1. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. <u>B-2516</u>

SUNDARY 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 WIW ☒	7. Lease Name or Unit Agreement Name <u>SMGSAU Tract 6</u>
2. Name of Operator <u>Cross Timbers Operating Company</u>	8. Well No. <u>3</u>
3. Address of Operator <u>P. O. Box 50847, Midland, Texas 79710</u>	9. Pool Name or Wadwell <u>Maljamar G-SA</u>
4. Well Location Unit Letter <u>K</u> : <u>1,980</u> Feet From The <u>South</u> Line and <u>1,980</u> Feet From The <u>West</u> Line Section <u>29</u> Township <u>17S</u> Range <u>33E</u> N.M.G.M. Lea <u>Carry</u>	
10. Elevation (Show whether OF, RKB, RT, GR, etc.)	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: ☐	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 1101

- 1) RU plugging unit. Install manual dbl-ram BOP.
- 2) Rel pkr. POH & LD pkr.
- 3) Set CIBP on WL @ 4,100' & cap w/5sx Class "C" cmt.
- 4) TIH w/tbg to 4-1/2" liner top @ 3,724'. Load hole w/9.5 ppg mud.
- 5) Spot 20sx Class "C" cmt plug fr/3,724'-3,606'.
- 6) POH w/tbg to 1,300'.
- 7) Spot 20sx Class "C" cmt plug fr/1,300'-1,182' (top of salt @ 1,340').
- 8) POH & LD tbg to 118'.
- 9) Spot 20sx Class "C" plug fr/118'-surf.
- 10) Cut off WH & install DHM.

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

SIGNATURE Gary L. Markestad TITLE Operations Engineer DATE 5/11/93
TYPE OR PRINT NAME Gary L. Markestad TELEPHONE NO. (915)682-8873

(This space for State Use)

Orig. Signed by
Paul Kautz
Geologist

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: _____

MAY 13 1993

THE COMMISSION MUST BE NOTICED 24
HOURS PRIOR TO THE COMMENCEMENT OF
PLUGGING OPERATIONS FOR THE C-103
TO BE APPROVED.