

DISTRICT I

1625 N. French Drive, Hobbs, NM 88240

## OIL CONSERVATION DIVISION

310 Old Santa Fe Trail, Room 206  
Santa Fe, New Mexico 87503

WELL API NO	300250554000
5. Indicate Type of Lease FED <input type="checkbox"/> STATE <input checked="" type="checkbox"/> FEE <input checked="" type="checkbox"/>	
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name NORTH HOBBS (G/SA) UNIT	
SECTION 36	
8. Well No. 321	
9. Pool name or Wildcat HOBBS (G/SA)	
10. Elevation (Show whether DF, RKB, RT GR, etc.) 3663' DF	

## 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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other INJECTOR	
2. Name of Operator ALTURA ENERGY LTD.	
3. Address of Operator 1017 W STANOLIND RD.	
4. Well Location Unit Letter <u>G</u> <u>1650</u> Feet From The <u>NORTH</u> Line and <u>1650</u> Feet From The <u>EAST</u> Line Section <u>36</u> Township <u>18-S</u> <u>37-E</u> NMPM LEA County	
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER: <input type="checkbox"/> SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> PLUG & ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <u>T &amp; A STATUS</u> <input checked="" type="checkbox"/>	

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.

TEST DATE 05/26/99

RU SCHLUMBERGER SET CIBP @4060'

CHART FOR THE NMOCID

PRESSURE READING: 520 PSI

LENGTH OF PRESSURE READING FIELD: 30 MIN.

TEST WITNESSED: YES J. ROBINSON.

This Approval of Temporary  
Abandonment Expires

6-21-2004

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

SIGNATURE Robert N. Gilbert TITLE LIFT SPECIALIST DATE 06 07 99  
TYPE OR PRINT NAME R.N. GILBERT TELEPHONE NO. 505/397-8206

(This space for State Use)

APPROVED BY ORIGINAL SIGNED BY TITLE COMPTROLLER DATE 06 07 99  
FIELD REP. II

JCSNG

CJ

