State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

FILE IN TRIPLICATE	OIL CONSERVATION DIVISION								
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	2040 Pacheco St.			WELL API NO.					
DISTRICT II	Santa Fe, NM 87505			30-025-07348 5. Indicate Type of Lease					
811 S. 1st Street, Artesia, NM 88210					FED FED	STATE	FEE X		
DISTRICT III					6. State Oil & G	<u> </u>	THE A		
1000 Rio Brazos Rd, Aztec, NM 87410									
SUNDRY NOTICES AND REPORTS ON WELLS									
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A					7. Lease Name or Unit Agreement Name				
					NORTH HOBBS (G/SA) UNIT				
1. Type of Well:				·	Section 18 8. Well No. 311 9. Pool name or Wildcat HOBBS (G/SA) t From The EAST Line NMPM LEA County Other Data				
Oil Well	Gas Well	Other T&A'd Well Sect 8. W. 9. Po 505/397-8200 The NORTH Line and 2310 Feet From Township 18S Range 38E tion (Show whether DF. RKB, RT GR, etc.) GL Itte Box to Indicate Nature of Notice, Report, or Other DE O SUBSEQU D ABANDON REMEDIAL WORK PLANS COMMENCE DRILLING OPNS.							
2. Name of Operator	TD.	The NORTH Line and 2310 wiship 18S Range on (Show whether DF, RKB, RT GR, etc.) Le Box to Indicate Nature of Notice, Repo O: ABANDON REMEDIAL WORK LANS COMMENCE DRILLIII CASING TEST AND 6			8. Well No.	311			
3. Address of Operator	2040 Pacheco St. Santa Fe, NM 87505 t. Artesia, NM 88210 s Rd, Aztec, NM 87410 SUNDRY NOTICES AND REPORTS ON WELLS ST 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.) B: Oil Well Gas Well Other T&A'd Well erator ENTAL PERMIAN LTD. Deparator Stanolind Rd., HOBBS, NM 88240 Socion 18 Township 18S Range 10. Elevation (Show whether DF. RKB, RT GR. etc.) 3653' GL Check Appropriate Box to Indicate Nature of Notice, Report. NOTICE OF INTENTION TO: STADOLING WORK PLUG AND ABANDON REMEDIAL WORK Y ABANDON CHANGE PLANS COMMENCE DRILLING ER CASING CASING TEST AND CE OTHER: Deposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, inclustication and the state of the Well 10/11/2002 Set 10/11/2002 Set 10/15/2002 TIELS SR. ENGR. TIELS SR. ENGR.				0 Pool name or	Wildoot	HODDC (C/CA)		
•					9. 1 001 name of	Wildcat	HOBBS (G/SA)		
4. Well Location					·	· · · · · ·			
Unit Letter B : 990	Feet From The	NORTH	Line and	Feet	From The	EAST	Line		
Section 18	Township	18S	Range	38E	NMPN	Л	LEA County		
	``								
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:									
PERFORM REMEDIAL WORK	PLUG AND ABANDO	ом 🥅 П	REMEDIAL WOR			ALTERING (
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPN					4S. 🗀		ANDONMENT X		
PULL OR ALTER CASING	CASING TEST AND CEMENT JOB					. 200 0 7.12	LA		
OTHER:	_						_		
SEE RULE 1103.	rations (Clearly state all perti	nent details, and	t give pertinent dates	s, including e	stimated date of st	arting any prope	osed work)		
RUPU CIBP set @4070'. Tag cmt @4030'.									
Circ Mud Gel from 4030' to 3000'. Snot omt from 3000' to 3600'. Bet of A-lay @3800', ** Ten of supply 4.5".									
Spot cmt from 3000' to 2600'. Bot of Anhy @2800'. ** Top of cmt on 4.5" prod csg @2660'. Circ Mud Gel from 2600' to 1800'.									
Spot cmt from 1800' to 1400'. Top of Anhy @1600'.									
Circ Mud Gel from 1400' to 500'.									
Perforate sqz hole @500'. Cicr cmt to surface.									
Spot cmt from 500' to Surface. Bot of 8-5/8" csg @322'. RDPU. Clean location.									
		_				. Le ^r			
Cut off wellhead and install dry hole	e marker. Approv	red as to pl	ugging of the	Well Bon	e.	•			
Rig up date: 10/11/2002 Liability under least is retained until						* '			
NULLICE TESTO DICER IS COMPLETED									
I hereby certify that the information above is true and complete to the best of my knowledge and belief.									
SIGNATURE Tour	Tilbut		TITLE SR. E	NGR. TEC	H	DATE	10/30/2002		
TYPE OR PRINT NAME Robert C	Gilbert				TELF	EPHONE NO.	505/397-8206		
(This space for State Use)							·		
APPROVED BY Jan. 1. 1	7 4 1		TITLE			NAL	2 4 2003		
CONDITIONS OF APPROVAL IF ANY:	Harrida					DATE			

OC FIELD REPRESENTATIVE II/STAFF MANAGER