

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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| LAND OFFICE | | |
| OPERATOR | | |

5a. Indicate Type of Lease
State ☐ Fee ☒

5. 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 A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

OIL WELL ☐ GAS WELL ☐ OTHER- Injection Well ☒

| | |
|---|----------|
| 7. Unit Agreement Name | |
| 8. Farm or Lease Name | Hardin B |
| 9. Well No. | 3 |
| 10. Field and Pool, or Wildcat | Hobbs |
| 11. Elevation (Show whether DF, RT, GR, etc.) | 3674 DF |
| 12. County | Lea |

Name of Operator
Bravo Energy, Inc.

Address of Operator
Post Office Box 2160, Hobbs, New Mexico 88241-2160

Location of Well
UNIT LETTER D 991 FEET FROM THE North LINE AND 660 FEET FROM
THE West LINE, SECTION 18 TOWNSHIP 18S RANGE 38E NMPM.

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

| NOTICE OF INTENTION TO: | | SUBSEQUENT REPORT OF: | |
|---|---|---|---|
| FORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input checked="" type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> | PLUG AND ABANDONMENT <input type="checkbox"/> |
| REPAIR OR ALTER CASING <input type="checkbox"/> | OTHER <input type="checkbox"/> | CASING TEST AND CEMENT JOB <input type="checkbox"/> | |

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1703.

6-25-84 Located casing leak between 972-1254'.

6-26-84 Set E Z Drill retainer @ 941' - squeeze with 250 sx "C" WOC 24 hrs.

6-29-84 Drill out squeeze did not hold.

6-30-84 Set E Z Drill retainer @ 910' O squeeze with 200 sx "H" WOC 48 hrs.

7-2-84 Drill out cement. Pressure tested with 500 PSI - Squeeze Holding Operation to witnesses by NMOCD - Otto Wink.

7-5-84

7-6-84 Well returned to injection.

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

SIGNED K. D. McPHERSON TITLE PRESIDENT DATE July 20, 1984

SIGNED Eddie W. Seny TITLE Oil & Gas Inspector DATE JUL 26 1984

CONDITIONS OF APPROVAL, IF ANY: