DISTRICT 1

OIL CONSERVATION DIVISION

| P.O. Box 1980, Hobbs, NM 88240 | | F. Trail, Room 206 ew Mexico 87503 | WELL APINO. 30-025-07448 5. Indicate Type of Lease |
|--|--|---------------------------------------|--|
| | | | FED STATE X FEF 6. State Oil & Gas Lease No. |
| SUNDRY NOTICES A | AND REPORTS ON W | /ELLS | |
| (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.) | | | 7. Lease Name or Unit Agreement Name |
| 1 Type of Well | | | NORTH HOBBS (GB/SA) UNIT |
| 2. Name of Operator | Well Other | | 8 Well Xo. [4] |
| ALTURA ENERGY LTD 3. Address of Operator | | | |
| 1710 WEST STANOLIND RD, HOBBS, NM | 88240 | 505/397-8200 | 9. Pool name or Wildeat HOBBS (GB/SA) |
| 4 Well Location | | | |
| | From The SOUTH | Line and 330 Feet | From The WEST Line |
| Section 29 | Township 18-S levation (Show whether DF. | Range 38-E | NMPM LEA County |
| 3644 | ` DF | • | |
| 11. Check Appro NOTICE OF INTENTION | priate Box to Indicate I I TO: | Nature of Notice, Report, o | r Other Data EQUENT REPORT OF: |
| PERFORM REMEDIAL PLUG ABANI | <i>t</i> 1 | REMEDIAL WORK | ALTERING CASING |
| TEMPORARILY ABANDON CHANG | JE PLANS | COMMENCE DRILLING OPY | SS. PLUG & ABANDONMENT |
| PULL OR ALTER CASING | | CASING TEST AND CEMEN | THE OR ADMINIONALE ! |
| OTHER: | | OTHER: TEMPORARY | ABANDON |
| 12 Describe Proposed or Completed Operations (Cleawork) SEE RULF 1103. | arly state all pertinent details | i, and give pertinent dates, includi | ng estimated date of starting any proposed |
| Test Date: 12/15/98 | | | |
| Pressure reading: Initial 640 psr. 15 min 6 | 40 psi; 30 min 645 ps | 1. | |
| Length of time pressure held: 30 min. | | | |
| Test Witnessed: No | | | |
| CIBP SET @3400°. CASING CIRC WITH INI | HBITED FLUID. WELL | IS TEMPORARILY ABANI | DONIED |
| | | • | |
| | | and the second second | 2004 |
| | | | 2004 |
| Thereby certify that the information shove is true and c | complete to the best of my kn | owledge and belief. | |
| SIGNATURE Total 11. | Gillet | TITLE LIFT SPECIALIS | ST DATE 01.12.99 |
| TYPE OR PRINT NAME R.N. GILBERT | | in Corr Civil | TELEPHONE 505/397-8200 NO. |
| (This space for State Use) | | | |
| APPROVED BY | TITLE | | DATE |
| | | | |

JC GN

