

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

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|---|
| WELL API NO.  |
| 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No.  |
| 7. Lease Name or Unit Agreement Name<br><br>Rocket-Cain   |
| 8. Well No.<br>1  |
| 9. Pool name or Wildcat<br>Hobbs East San Andres  |

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| 10. Elevation (Show whether DF, RKB, RT, GR, etc.)<br>DF 3615' |
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**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.)

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| 1. Type of Well:<br>OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>  |
| 2. Name of Operator<br>Hillin-Simon Oil Company  |
| 3. Address of Operator<br>P. O. Box 1552 MIDLAND, TX 79702   |
| 4. Well Location<br>Unit Letter <u>L</u> : <u>1650</u> Feet From The <u>South</u> Line and <u>990</u> Feet From The <u>West</u> Line<br>Section <u>30</u> Township <u>18 South</u> Range <u>39 East</u> NMPM <u>Lea</u> County |

|   |   |
|---|---|
| 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data |   |
| <b>NOTICE OF INTENTION TO:</b>  | <b>SUBSEQUENT REPORT OF:</b>                        |
| PERFORM REMEDIAL WORK <input type="checkbox"/>                                | REMEDIAL WORK <input type="checkbox"/>              |
| TEMPORARILY ABANDON <input type="checkbox"/>                                  | ALTERING CASING <input type="checkbox"/>            |
| PULL OR ALTER CASING <input type="checkbox"/>                                 | COMMENCE DRILLING OPNS. <input type="checkbox"/>    |
| OTHER: <u>Bradenhead Test</u> <input checked="" type="checkbox"/>             | PLUG AND ABANDONMENT <input type="checkbox"/>       |
|   | CASING TEST AND CEMENT JOB <input type="checkbox"/> |
|   | OTHER: <input 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.

5-17-90

Dug out Cellar. Replace & repaired valves & 2" lines off bradenhead.

Tested as follows: 0# on bradenhead, 240# production

casing. Test witnessed by Ray Smith with the NMOGCD.

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

SIGNATURE Stephen D. Smith TITLE Drlg & Prod Supt DATE 6-20-90  
TYPE OR PRINT NAME Stephen D. Smith TELEPHONE NO. 915/682-2202

(This space for State Use)

APPROVED BY [Signature] TITLE OIL & GAS INSPECTOR DATE JUN 25 1990  
CONDITIONS OF APPROVAL, IF ANY: