

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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.	30-025-29073
5. Indicate Type of Lease	FED <input type="checkbox"/> STATE <input 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	24
8. Well No.	432
9. Pool name or Wildcat	HOBBS (G/SA)

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 TA'd <input type="checkbox"/>
2. Name of Operator	ALTURA ENERGY LTD.
3. Address of Operator	1017 W STANOLIND RD.
4. Well Location	Unit Letter <u>I</u> : <u>2480</u> Feet From The <u>SOUTH</u> Line and <u>1280</u> Feet From The <u>EAST</u> Line Section <u>24</u> Township <u>18-S</u> Range <u>38-E</u> NMPM LEA County
10. Elevation (Show whether DF, RKB, RT GR, etc.)	3666' GL

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
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: <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <u>CONVERT TO INJECTION</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: 12/08/99

PRESSURE READING: INITIAL 500 PSI; 15 MIN - 500 PSI; 30 MIN - 490 PSI.

LENGTH OF PRESSURE READING HELD: 30 MIN.

SET 7" GUIBERSON UNI VI PKR @ 4112'.

CIRC CSG WITH INHIBITED FLUID.

RIG UP DATE = 11/22/99

RIG DOWN DATE = 12/08/99

WELL HAS BEEN CONVERTED TO INJECTION.

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 12/13/99
TYPE OR PRINT NAME R.N. GILBERT TELEPHONE NO. 505/397-8206

(This space for State Use)

APPROVED BY ONCE AGAIN FOR THE PEOPLE TITLE DISTRICT I SUPERVISOR DATE DEC 28 1999

Pmx-199

JCSN

12/13/99
C6p

