

|                        |  |
|------------------------|--|
| NO. OF COPIES RECEIVED |  |
| DISTRIBUTION           |  |
| SANTA FE               |  |
| FILE                   |  |
| U.S.G.S.               |  |
| LAND OFFICE            |  |
| OPERATOR               |  |

|  |
|--|
| 5a. Indicate Type of Lease<br>State <input checked="" type="checkbox"/> Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.<br>V-1417   |

|  |   |
|--|---|
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-  | 7. Unit Agreement Name<br>N/A             |
| 2. Name of Operator<br>Mitchell Energy Corporation   | 8. Farm or Lease Name<br>State "JR"       |
| 3. Address of Operator<br>P. O. Box 4000, The Woodlands, TX. 77387-4000  | 9. Well No.<br>1                          |
| 4. Location of Well<br>UNIT LETTER <u>P</u> <u>330</u> FEET FROM THE <u>S</u> LINE AND <u>430</u> FEET FROM<br>THE <u>E</u> LINE, SECTION <u>11</u> TOWNSHIP <u>18-S</u> RANGE <u>35-E</u> NMPM.         | 10. Field and Pool, or Wildcat<br>Wildcat |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br>3882' GL  | 12. County<br>Lea                         |

|  |   |  |   |
|--|---|--|---|
| 16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data |   |  |   |
| NOTICE OF INTENTION TO:  |   | SUBSEQUENT REPORT OF:                                |   |
| PERFORM REMEDIAL WORK <input checked="" 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"/> |
| PULL OR ALTER CASING <input type="checkbox"/>                                | OTHER <input type="checkbox"/>            | CASING TEST AND CEMENT JOBS <input type="checkbox"/> | OTHER <input type="checkbox"/>                |

17. 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.

- 1) Perforate: Strawn 11,013-11,026' - 4 SPF
- 2) Acidize: 15,000 gallons, 15% NEFE acid
- 3) Injection Rate: 4 barrels per minute

|  |                                       |                            |
|--|---------------------------------------|----------------------------|
| 18. I hereby certify that the information above is true and complete to the best of my knowledge and belief. |                                       |                            |
| SIGNED <u>Carol J. Miller</u><br>Carol J. Miller   | TITLE <u>Regulatory Affairs Clerk</u> | DATE <u>Sept. 23, 1985</u> |
| ORIGINAL SIGNED BY JERRY SEXTON<br>DISTRICT I SUPERVISOR   |                                       |                            |
| PROVED BY <u></u>  | TITLE <u></u>                         | DATE <u>SEP 26 1985</u>    |
| CONDITIONS OF APPROVAL, IF ANY:  |                                       |                            |