

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

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.
30-025-31446

Indicate Type of Lease
STATE ☒ FEE ☐

State Oil & Gas Lease No.
B-2516

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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.) | | Lease Name or Unit Agreement Name SEMGS AU |
| Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> WIW <input type="checkbox"/> | | |
| Name of Operator Cross Timbers Operating Company | | Well No. 609 |
| Address of Operator 3000 N. Garfield, Suite 175, Midland, TX 79705 | | Pool name or Wildcat Maljamar Grayburg San Andres |
| Well Location Unit Letter L 1920 Feet From The South Line and 450 Feet From The West Line Section 29 Township 17 18S Range 33E NMPM Lea County | | |
| Elevation (Show whether DF, RKB, RT, GR, etc.) 4040 GR | | |

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☒

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ANBANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

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.

11/12/97

1. MIRU pulling unit.
2. POH w/tubing and packer.
3. Pressure tested tubing back in hole.
4. Replaced 2 jts of 2-3/8" tubing that had holes.
5. Set packer @ 4006'.
6. Test tubing/casing annulus to 300 psig for 15 minutes. Held OK.
7. Return to injection when conformation from OCD is received.

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

SIGNATURE

Darrin Steed

TITLE

Operations Engineer

DATE 11-18-97

TYPE OR PRINT NAME Darrin Steed

TELEPHONE NO 915/682-8873

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

JCS

