

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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

WELL API NO.
30-025-31657

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
B 1078

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.)

7. Lease Name or Unit Agreement Name

Dirt Devil "9" State

8. Well No.

1

9. Pool name or Wildcat

Wildcat

1. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

2. Name of Operator

Collins & Ware, Inc.

3. Address of Operator

303 W. Wall, Ste. 2200, Midland, TX 79701

4. Well Location

Unit Letter F : 1980 Feet From The North Line and 1980 Feet From The West Line

Section 9 Township 18S Range 34E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

4047.7 GR

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

REMEDIAL WORK ☐

ALTERING CASING ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☒

PULL OR ALTER CASING ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

OTHER: ☐

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.

2-26-94: Pulled 13 jts. / 8 5/8" J55 8RD STC csg. Spot 120 sx cement plug F/550' to 350'.
WOC. TIH, tag plug @ 386'; spot 25 sx F/386'-350'. Spot 10 sx cement plug
F/30' to surface. Install dryhole marker. Well P&A.

Final report.

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

SIGNATURE Max Guerry TITLE Regulatory Mgr. DATE 2-28-94

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

APPROVED BY Carly M. Hill TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY

OIL & GAS INSPECTOR

AUG 09 1994

OIL CONSERVATION DIVISION

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P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-31657
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. B-1078

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Lease Name or Unit Agreement Name DIRT DEVIL "9" STATE
2. Name of Operator COLLIN & WARE INC	8. Well No. 1
3. Address of Operator 303 W Wall Ste 2200 Midland, TX 79701	9. Pool name or Wildcat WILDCAT
4. Well Location Unit Letter <u>F</u> : <u>1980</u> Feet From The <u>NORTH</u> Line and <u>1980</u> Feet From The <u>WEST</u> Line Section <u>9</u> Township <u>185</u> Range <u>34E</u> NMPM <u>LEA</u> County <u></u>	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 4047.7GR	

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"/>	PLUG AND ABANDONMENT <input checked="" 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.

COMPANY REP. (JOHN HOFFMAN) NOTIFIED NMOCD PRIOR TO OUR MOVING IN.
2-24 CUT 8-5/8" CSG @ 498' POH W/ CSG.
2-25 SPOT 120 SXS CMT FROM 55', 2-25 Tag cut @ 384', 2-25 SPOT 20 sxs
cmt fill to 355'
2-25 CIRC 20 SXS CMT 30' -surface.
CUT OFF WH AND INSTALL MARKER.

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

SIGNATURE [Signature] TITLE FIELD SUPERVISOR DATE 02/26/94
TYPE OR PRINT NAME ROLAND JUDSON TELEPHONE NO. (915) 362-432

(This space for State Use)

APPROVED BY [Signature] TITLE CHIEF OF DIVISION DATE AUG 09 1994
CONDITIONS OF APPROVAL, IF ANY