

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

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

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO. 30-025-33007
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. LG-2731

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 ☒ GAS WELL ☐ OTHER ☐	7. Lease Name or Unit Agreement Name JFG State
2. Name of Operator Morexco, Inc.	8. Well No. 1
3. Address of Operator P. O. Box 481 Artesia, NM 88211-0481	9. Pool name or Wildcat East EK
4. Well Location Unit Letter <u>J</u> : <u>1650</u> Feet From The <u>South</u> Line and <u>1650</u> Feet From The <u>East</u> Line Section <u>15</u> Township <u>18S</u> Range <u>34E</u> NMEM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

11. 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 CPNS. ☐	PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐	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.

Operator proposes to plug & abandon the above well as follows:

- 1) Pull tubing & rods & set ccbp @ 4344 & cap w/35' of cement.
- 2) Shoot & pull casing @ 2650'.
- 3) TIH & load 9.5# gelled mud.
- 4) Set 100' plug in & out of casing stub @ 2650'. - Tag
- 5) Set 100' plug @ 1805' (top of salt).
- 6) Set 100' plug in & out of surface shoe @ 1215' (tag plug).
- 7) Set 10 sx surface plug.
- 8) Cut off well head & set dry hole marker.
- 9) Cut anchors & clean up location.

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

SIGNATURE Donald G. Becker, Jr. TITLE President DATE 12/15/99

TYPE OR PRINT NAME Donald G. Becker, Jr. TELEPHONE NO. 505-746-6520

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

IC

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