

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.

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
B-4120-1

7. Lease Name or Unit Agreement Name

West Lovington Unit

8. Well No.

17

9. Pool name or Wildcat

Lovington San Andres West

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 Injection Well

2. Name of Operator

GREENHILL PETROLEUM CORPORATION

3. Address of Operator

11490 WESTHEIMER, SUITE 200/HOUSTON, TEXAS 77077-6841

4. Well Location

Unit Letter I : 1980 Feet From The South Line and 660 Feet From The East Line

Section 6

Township 17 South Range 36 East NMPM

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 OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Conversion to injection WFX-622 xxxxxxxx ☐

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.

Set AD-1 packer at 4676' on string of 2 3/8" IPC tubing. Pressure up on casing to 300 # for 30 minutes with chart for state. Good test.

Treated with 4000 gallons of 28% NEFE HCL Acid and 18 tons of CO2.

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

SIGNATURE Michael J. Newport TITLE Land Manager/Permian Basin DATE 5-27-92

TYPE OR PRINT NAME Michael J. Newport TELEPHONE NO. 713/589-8484

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE JUN 02 '92

CONDITIONS OF APPROVAL, IF ANY:

C B N gm

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