

L CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

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

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 - I" (FORM C-101) FOR SUCH PROPOSALS.

| | | |
|---|--|--|
| OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> | | 7. Unit Agreement Name |
| Name of Operator The Superior Oil Company | | 8. Farm or Lease Name Mescalero Ridge |
| Address of Operator P.O. Box 3901, Midland, Texas 79702 | | 9. Well No. 1 |
| Location of Well UNIT LETTER <u>K</u> <u>1980</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM THE <u>West</u> LINE, SECTION <u>17</u> TOWNSHIP <u>19S</u> RANGE <u>35E</u> N.M.P.M. | | 10. Field and Pool, or Wildcat Scharb - Bone Spring |
| 15. Elevation (Show whether DF, RT, GR, etc.) 3838' GR | | 12. County Lea |

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"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | CHANGE PLANS <input type="checkbox"/> | COMMENCE DRILLING OPS. <input type="checkbox"/> | PLUG AND ABANDONMENT <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | OTHER <input type="checkbox"/> | CASING TEST AND CEMENT JOB <input type="checkbox"/> | OTHER <u>Recondition.</u> <input type="checkbox"/> |

7. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1503.

10-2-84 MI RU Pool Well Service.
 10-3-84 Ppd 72 bbls brine wtr to kill well.
 10-4-84 Ppd additional 30 bbls brine, POH w/prod equipment.
 10-5-84 Ppd 2000 gals 15% HCL acid, flushed w/61 bbls filtered water and 66 - 7/8" RCN balls, swabbed, well started flowing. SION.
 10-6-84 Swabbed, well started flowing - in 25 hrs well flowed 236 BO, OBW.
 10-7-84 Flowed then SI for 7 hrs, total recovery 447 BO. 66 BW.
 10-8-84 Tested on 18/64" choke, recovered 391 BO, OBW.

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

SIGNED [Signature] G.E. Tate TITLE Division Operations Supt. DATE 10-8-84

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE OCT 12 1984

CONDITIONS OF APPROVAL, IF ANY: