

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.<br>30-025-28234                                                                        |
| 5. Indicate Type of Lease<br>STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No.                                                                        |
| 7. Lease Name or Unit Agreement Name<br>Norris                                                      |
| 8. Well No.<br>#1                                                                                   |
| 9. Pool name or Wildcat<br>So Humble City (Strawn)                                                  |

|                                                                                                                                                                                                        |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| SUNDRY NOTICES AND REPORTS ON WELLS<br>(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:<br>OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>                                                                      |  |
| 2. Name of Operator<br>Bonneville Fuels Corporation                                                                                                                                                    |  |
| 3. Address of Operator<br>1660 Lincoln Street, Ste 1800, Denver, CO 80264                                                                                                                              |  |
| 4. Well Location<br>Unit Letter L : 330 Feet From The West Line and 1650 Feet From The South Line<br>Section 13 Township 17S Range 37E NMPM Lea County                                                 |  |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.)<br>3722.61                                                                                                                                          |  |

|                                                                               |                                                          |
|-------------------------------------------------------------------------------|----------------------------------------------------------|
| 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.

8/2/91 MIRU well service. RIH w/CIBP & set @ 11640'KB.

Spot cmt plugs as follows:

4 sx Cl-H neat cmt on top of CIBP @ 11640'.

PT 5 1/2" csg 500 psi, 30 min. OK.

100' plug (25 sx Cl-H neat cmt) 8600-8500'.

100' plug (25 sx Cl-H neat cmt) 7200-7100'.

Free pt csg, Cut off 5 1/2" prod csg @ 4631'. POOH w/ 112 jts 17# 5 1/2" csg.

100' plug (40 sx Cl-H neat + 2% cacl2) 4757'-4631' covering 50% on 5 1/2" & 50% on 9 5/8" csg. WOC 4 hrs. RIH tagged cmt plug @ 4631'KB.

100' plug (25 sx Cl-H neat cmt) 518' to 418'.

40' plug (15 sx Cl-H neat) 40' to Surface.

8/10/91 Install Dry Hole Marker on 13 3/8" csg. Well P&A.

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

SIGNATURE Doris Maly TITLE \_\_\_\_\_

8/12/91  
(303)  
DATE 863-1555  
TELEPHONE NO. 2

TYPE OR PRINT NAME

(This space for State Use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

OIL & GAS INSPECTOR

JAN 22 '92  
DATE

RECEIVED

AUG 14 1991

OFFICE  
HOURS OFFICE