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 OIL CONSERVATION DIVISION P.O. Box 1980, Hobbs, NM 88240 WELL API NO. P.O. Box 2088 30-025-30857 DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease STATEX FEE _ DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410 6. State Oil & Gas Lease No. B - 3009SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Mobil "5" State 1. Type of Well: WELL K WELL 2. Name of Operator 8. Well No. Mallon Oil Company 3. Address of Operator 9. Pool name or Wildcat 1099 18th Street, Ste. 2750, Denver, CO. 80202 Wildcat Well Location Unit Letter 0: 760' Feet From The South Line and 1750' Feet From The East Township 17S Range 36E County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3891.8' GR Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. 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 | 3 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. Run 119 Jts. of 8 5/8" csg 32# J-55 8rd R-3 casing set at 5217'. Float shoe @ 5195' & float collar @ 5151'. Cemented with: Lead 920 sx. Class "C" + 3% D-79 Extender + $1/4 \ \#/sx \ D-29$ Cellophane flakes. Tailed in with 300 sx Class "C" Neat. Compressive strength @ 110° F btm. hole temp. 1285 psi/12 hrs. WOC. Plug down @ 1:45 AM MDT 5/10/90. Circ. 75 sx cmt to pit. Good returns throughout cmtg. Test casing & BOP to 1500#, Held OK. I hereby certify that the information above is true and complete to the best of my knowledge and belief. _ mme _ Production Manager __ DATE ___ <u>5/11/</u>90 SIGNATURE ... Joe H. Cox, Jr. TYPE OR PRINT NAME TELEPHONE NO. (This space for State Use) ORIGINAL SIGNED BY JERRY SEXTON MAY 1 5 1990 DISTRICT I SUPERVISOR

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: