

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**  
310 Old Santa Fe Trail, Room 206  
Santa Fe, New Mexico 87503

WELL API NO. 30-025-32935

5. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil & Gas Lease No. 16969

**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

2. Name of Operator  
Stevens & Tull, Inc.

3. Address of Operator  
P. O. Box 11005, Midland, Texas 79702

7. Lease Name or Unit Agreement Name

Pearl State

8. Well No. 1

9. Pool name or Wildcat  
Pearl Queen

4. Well Location  
Unit Letter F : 1980 Feet From The North Line and 1980 Feet From The West Line  
Section 36 Township 19S Range 34E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3720 GR

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: Stimulation ☒

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.

5/25/95 - Acidize perforations from 4888' - 5050' w/ 1500 gals 15% NEFE HCL, put well on pump to test.

6/5/95 - Production Test 6 BOPD, 13 BWPD, 8 mcfD

6/6/95 - Frac Perforations w/ 60,000# 16/30 sand + 30,000 gals Borate gel @ 35 BPM. Prepare to Flow back Frac.

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

SIGNATURE Michael G. Mooney TITLE Engineer DATE 6/6/95

TYPE OR PRINT NAME Michael G. Mooney TELEPHONE NO. 915/699-1410

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

JUN 09 1995