

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

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-025-35320
Indicate Type of Lease STATE _____ FEE <input checked="" type="checkbox"/>
State Oil & Gas Lease No.
Lease Name or Unit Agreement Name New York 14
Well No. 1
Pool name or Wildcat Humble City, Strawn, Southwest

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.)	
Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER _____	
Name of Operator Nearburg Producing Company	
Address of Operator 3300 N A St., Bldg 2, Suite 120, Midland, TX 79705	
Well Location Unit Letter <u>L</u> : <u>2130</u> Feet From The <u>South</u> Line and <u>660</u> Feet From The <u>West</u> Line Section <u>14</u> Township <u>17S</u> Range <u>37E</u> NMPM <u>Lea</u> County	
Elevation (Show whether DF, RKB, RT, GR, etc.) <u>3744' GR</u>	

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 ANBANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: Surface casing and cement ☒

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.

01/24/01: Spud well at 2000 on 01/24/01.

01/24/01: Drilled 17-1/2" hole to 444'. C&C hole. RU and ran 10 jts of 13-3/8", 48#, H40, ST&C casing to 444'. RU and cement using 200 sx of 35/65 "C" poz + additives and 150 sx of "C" + additives. Circ 100 sx to surface. WOC 18 hrs. Cut off csg and weld on wellhead. NU BOPE and test.

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

SIGNATURE

Kim Stewart

TITLE Regulatory Analyst

DATE 01-31-01

TYPE OR PRINT NAME Kim Stewart

TELEPHONE NO. 915/686-8235

(This space for State Use)

Checked by
Paul Garcia
Geologist

APPROVED BY

TITLE

DATE

FEB 06 2001

CONDITIONS OF APPROVAL, IF ANY: