DISTRICT I P.O. Box 1980, Hobbs, NM 88240

OIL CO ERVATION DIVISION P.O. Box 2088

Santa Fe.	New	Mexico	87504	1-2088

WELL.	' O.	30-025-23314	
5. Indica	te Type	of Lease STATE	FEE [
6. State	O:1 & C	as Lease No.	

P.O. Drawer DD, Arnesia, NM 88210 DISTRICT.III 1000 Ro Birzoce Rd, Arnec, NM 87410 SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOR, USE 'APPLICATION FOR PERMIT' (FORM-C-101) FOR SUCH PROPOSALS) 1. Type of Well: OBL. WELL W. WELL OR TO SUCH PROPOSALS) 2. Name of Operator Pyramid Energy, Inc. 3. Address of Operator Pyramid Energy, Inc. 3. Address of Operator 10101 Reunion Place Ste. 210 San Antonio, Texas 78216 4. Well Leastion Unit Letter A: 1150 Feet From The North Line and 1150 Feet From The East Line Section 31 Townstip 198 Range 35E NMFM Lea County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3728 151. 11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT CASING TEST AND CEMENT JOB 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.
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05/18/94 Attempted to set CIBP above perfs. Could not get CIBP below 1602'. Ran in
to hole with tubing to 4773' and spotted 45 sack cement plug. WOC overnight
05/23/94 and tagged top of cement plug at 4415'. Circulated hole with mud laden
fluid. Ran tubing and packer to test casing. Found good casing from 1847'
to 4415'. Casing would not test 1040' to 1847'. Spotted 40 sacks cement
at 1900'. Displaced 15 sacks into formation. Perforated 5 1/2" casing
with 4 shots at 1415'. Circulated 165 sacks cement down the 5 1/2" casing
and back to surface through the 8 5/8" bradenhead. Did not displace cement
down 5 1/2" casing. Left cement at surface inside 5 1/2" casing. Cut off
casing and weld on cap and marker.
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I hereby certify that the information above in true and complete to the best of my knowledge and belief.
I beneby certify that the inforthizing above by true and complete to the best of my knowledge and bedief. SKONATURE

(This space for State Use) OIL & GAS INSPECTOR