

DISTRICT I

1625 N. French Drive, Hobbs, NM 88240

OIL CONSERVATION DIVISION

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

WELL API NO

300252611800

5. Indicate Type of Lease

FED ☐ STATE ☐ FEE ☒

6. State Oil & Gas Lease No

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 ALURA ENERGY LTD.

7. Lease Name or Unit Agreement Name

SOUTH HOBBS (G/SA) UNIT

3. Address of Operator 1017 W STANOLIND RD

8. Well No 123

9. Pool name or Wildcat
HOBBS (G/SA)

4. Well Location

Unit Letter H 2390 Feet From The NORTH Line and 150 Feet From The EAST Line
Section 6 Township 19-S 38-E NMPM LEA County

10. Elevation (Show whether D.P., RKB, RT GR, etc.)
3624 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 & ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER F & A STATUS ☒

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

TEST DATE 04/02/99

PRESSURE READING 320 PSI

LENGTH OF PRESSURE READING HELD 30 MIN

TEST WITNESSED NO

**This Approval of Temporary
Abandonment Expires**

5-11-2004

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

SIGNATURE Robert N. Gilbert

TITLE LIFT SPECIALIST

DATE 04/06/99

TYPE OR PRINT NAME R N GILBERT

TELEPHONE NO. 505/397-8206

(This space for State Use)

APPROVED BY

TITLE

DATE

ICG

df

16 MIN

Altura Energy

S.H. # 123

4-2-99

Pete Trucking #55

C.L. Ball

NTW PC

32 MIN

40 MIN

48 MIN

56 MIN

64 MIN

72 MIN

80 MIN

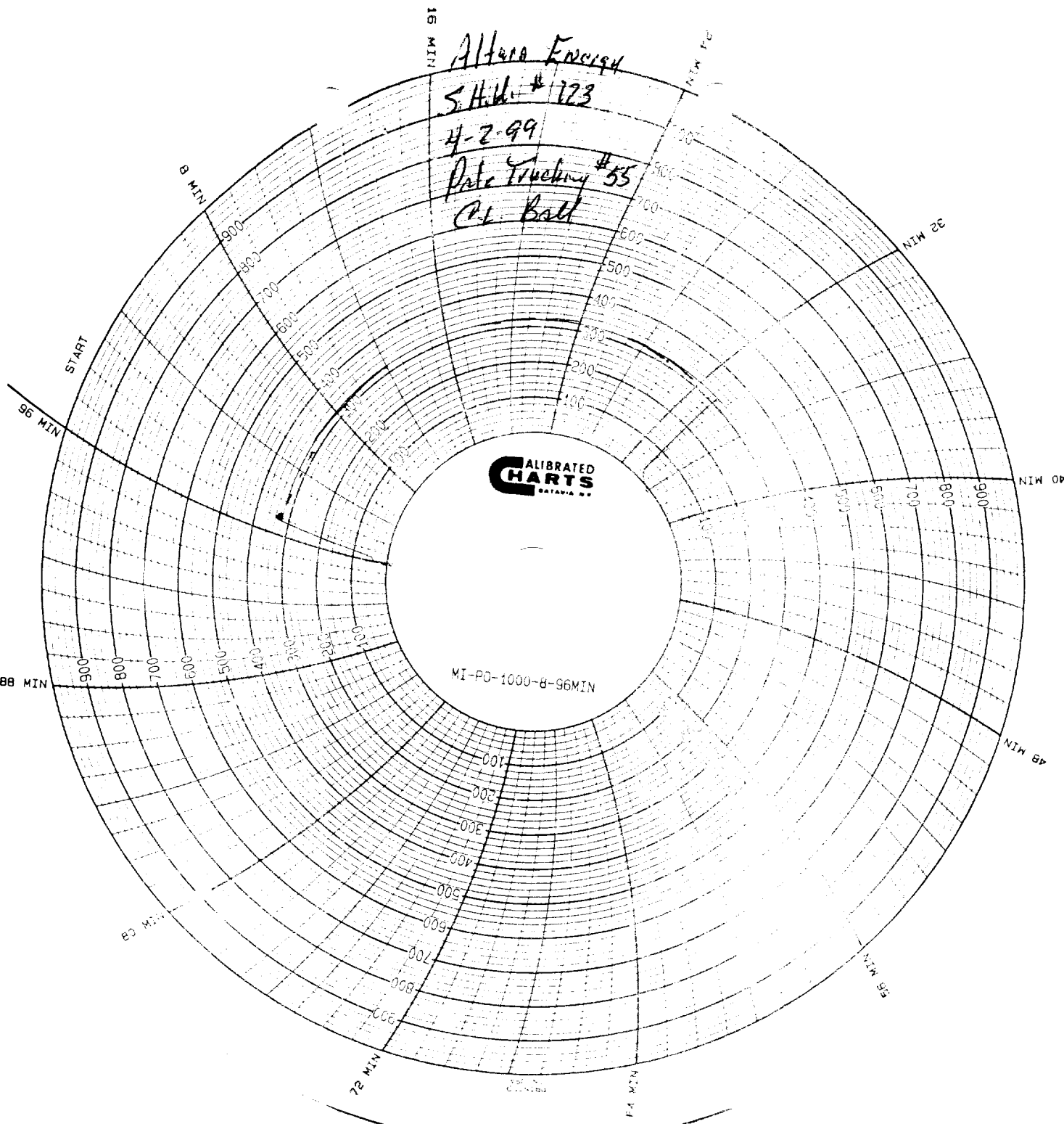
88 MIN

96 MIN

START

CALIBRATED
CHARTS
BATAVIA, NY

MI-PC-1000-8-96MIN



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

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO. 30-025- 26118

5. Indicate Type of Lease
STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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.)

7. Lease Name or Unit Agreement Name

South Hobbs (GSA) Unit

1. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator
Altura Energy LTD

8. Well No. 123

3. Address of Operator
P.O. Box 4294, Houston, Texas 77210-4294

9. Pool name or Wildcat
Hobbs (GSA)

4. Well Location
Unit Letter H : 2390 Feet From The North Line and 150 Feet From The East Line

Section 6 Township 19-S Range 38-E NMPM Lea County

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

3624' 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: 'TxA Status' ☒

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.

Test Date: 7/2/97

Pressure Reading: 560 psi

Length of time pressure held: 30 min.

Test Witnessed: No

This Approval of Temporary
Abandonment Expires 8-13-2002

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

SIGNATURE Mark Stephens TITLE Business Analyst (SG) DATE 8/7/97
(281)
TYPE OR PRINT NAME Mark Stephens TELEPHONE NO. 366-7335

(This space for State Use)

ORIGINAL SIGNED BY CHRIS WILLIAMS
DISTRICT I SUPERVISOR

AUG 13 1997

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

ICJSG

