

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form O-103
Revised 10-1-78

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SANTA FE	
FILE	
U.S.G.I.	
LAND OFFICE	
OPERATOR	

0-3-NMOCD
1-Warrior, FW
1-File

5a. Indicate Type of Lease	
State ☒	Fee ☐
5. State Oil & Gas Lease No.	

SUNDRY NOTICES AND REPORTS ON WELLS

DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO OPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE APPLICATION FOR PERMIT (FORM O-101) FOR SUCH PROPOSALS.

1. OIL WELL ☒ GAS WELL ☐ OTHER ☐	7. Unit Agreement Name
2. Name of Operator Warrior, Inc.	8. Farm or Lease Name L. W. White 34
3. Address of Operator P. O. Box 1737, Hobbs, NM 88240	9. Well No. 2
4. Location of Well UNIT LETTER J 1980 FEET FROM THE South LINE AND 1980 FEET FROM THE East LINE, SECTION 34 TOWNSHIP 20S RANGE 36E NMPM.	10. Field and Pool, or Wildcat Eumont
15. Elevation (Show whether DE, RT, GR, etc.)	12. County Lea

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 ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPNS. ☒	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOBS ☐	

17. 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.

12-13-80 Spudded 11" hole at 9:00 a.m.

12-14-80 Drilled 11" hole to 360'. Ran 9 jts. (360') of 8 5/8", K-55, 8R csg. and set at 350'. Howco cemented with 200 sxs Class "C" cement with 2% CaCl₂ and 1/4# flocele/sx. Circulated 85 sxs to pit. WOC.

12-29-80 Drilled 7 7/8" hole to 824'. Started having hole problems; apparently casing is parted at 88' and 285'. Operations temporarily suspended.

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

SIGNED Mohammed Yamin Merchant TITLE Consulting Engineer DATE 1-6-81

APPROVED BY Jerry Sexton TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: _____