State of New Mexico Energy, Minerals and Natural Resources Department

DISTRICT (

OIL CONSERVATION DIVISION

P.O. Box 1980, Hobbs, NM 88	510	310 Old Santa Fe Trail, Room 206			WELL API NO. 30-025-78357				
	Santa Fe, New Mexico 875			2002	30-025-28357 5. Indicate Type of Lease				
					FED FED	STATE X	T FEE [—	
					6. State Oil &		1		
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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				
1. Type of Well:					SOUTH HOBBS UNIT				
Oil Well X Gas Well Other					GB/SA				
2. Name of Operator ALTURA ENERGY LTD.						8. Well No. 154			
3. Address of Operator 1710 WEST STANOLIND RD, HOBBS, NM 88240 505/397-8200						9. Pool name or Wildcat CRAYBURG SAN ANDRES			
4. Well Location						SAN ANDRES			
Unit Letter B	Feet From The	NORTH	Line and	2600 Feet	From The	EAST Lin	ie		
Section 9	Township	19-S		ange 38-E	NMP:	M L	EA Coun	ty	
	10. Elevation (Show 3611' KB	whether DF,	RKB. RT GR. etc	c.)					
11. NOTICE	Check Appropriate Box t OF INTENTION TO:	o Indicate 1	Nature of Not			EDODT OF			
PERFORM REMEDIAL	PLUG AND		DEMEDIAL		SEQUENT RE				
WORK	ABANDON		REMEDIAL	WORK		ALTERING CAS	SING		
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE	E DRILLING OP	NS.	PLUG & ABAN	DONMENT		
PULL OR ALTER CASING CASING TEST AND CEMEN					Т ЈОВ				
OTHER: OTHER:TEMPORARY					ABANDON			X	
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.									
PULL OUT OF HOLE WITH PRODUCTION EQUIPMENT. RIH W/5.5" CSG SCRAPER TO 4150'. SET 5.5" CIBP @ 4125'. (TOP PERF @4172') TEST CSG TO 500 PSI FOR 30 MIN AND CHART FOT THE NMOCD. 6/3/96 CIRC CSG WITH INHIBITED FLUID. POH W/FBG. RDPU. CLEAN LOCATION.									
			en in 1	loomas j	f Turpora		2003)	
			Avendo	Abbroas exp	1795			*•	
I hereby certify that the informati	on above is true and complete to the	best of my kn	owledge and be	elief.	·				
SIGNATURE	et N. Lillei	/	TITLE []	IFT SPECIALIS	ST	DATE 0	6/10/98		
TYPE OR PRINT NAME R.N	I. GILBERT		. <u></u> -				5/397-820	5	
(This space for State Use)					.10.				
APPROVED BY	L SIGNED BY CHRIS WILL! ISTRICT I SUPERVISOR	AAAE TITLE			D	ате 🏋	TUK	<u> </u>	

