

DISTRICT I

P.O. Box 1980, Hobbs, NM 88240

**OIL CONSERVATION DIVISION**

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

WELL API NO. <b>30-025-29442</b>
5. Indicate Type of Lease FED <input type="checkbox"/> STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <u>INSPECTOR</u>	7. Lease Name or Unit Agreement Name <u>S Hobbs</u> GRAYBURG/SAN ANDRES <u>U4</u>
2. Name of Operator ALTURA ENERGY LTD.	8. Well No. 198
3. Address of Operator 1710 WEST STANOLIND RD, HOBBS, NM 88240 505/397-8200	9. Pool name or Wildcat HOBBS <u>GB/SA</u>
4. Well Location Unit Letter <u>GC</u> 749 Feet From The <u>NORTH</u> Line and <u>1981</u> Feet From The <u>WEST</u> Line Section 6 Township 19-S Range 38-E NMPM LEA County	
10. Elevation (Show whether DF, RKB, RT GR, etc.) 3648' DF	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data			
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG & ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <u>TEMPORARY ABANDON</u> <input checked="" type="checkbox"/>	

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: 11/24/98

CIBP @ 4105' per RG

Pressure reading: Initial 560 psi: 15 min. - 560 psi: 30 min. - 560 psi.

Length of time pressure held: 30 min.

Test Witnessed: No

**This Approval of Temporary  
Abandonment Expires** 12/30/2008

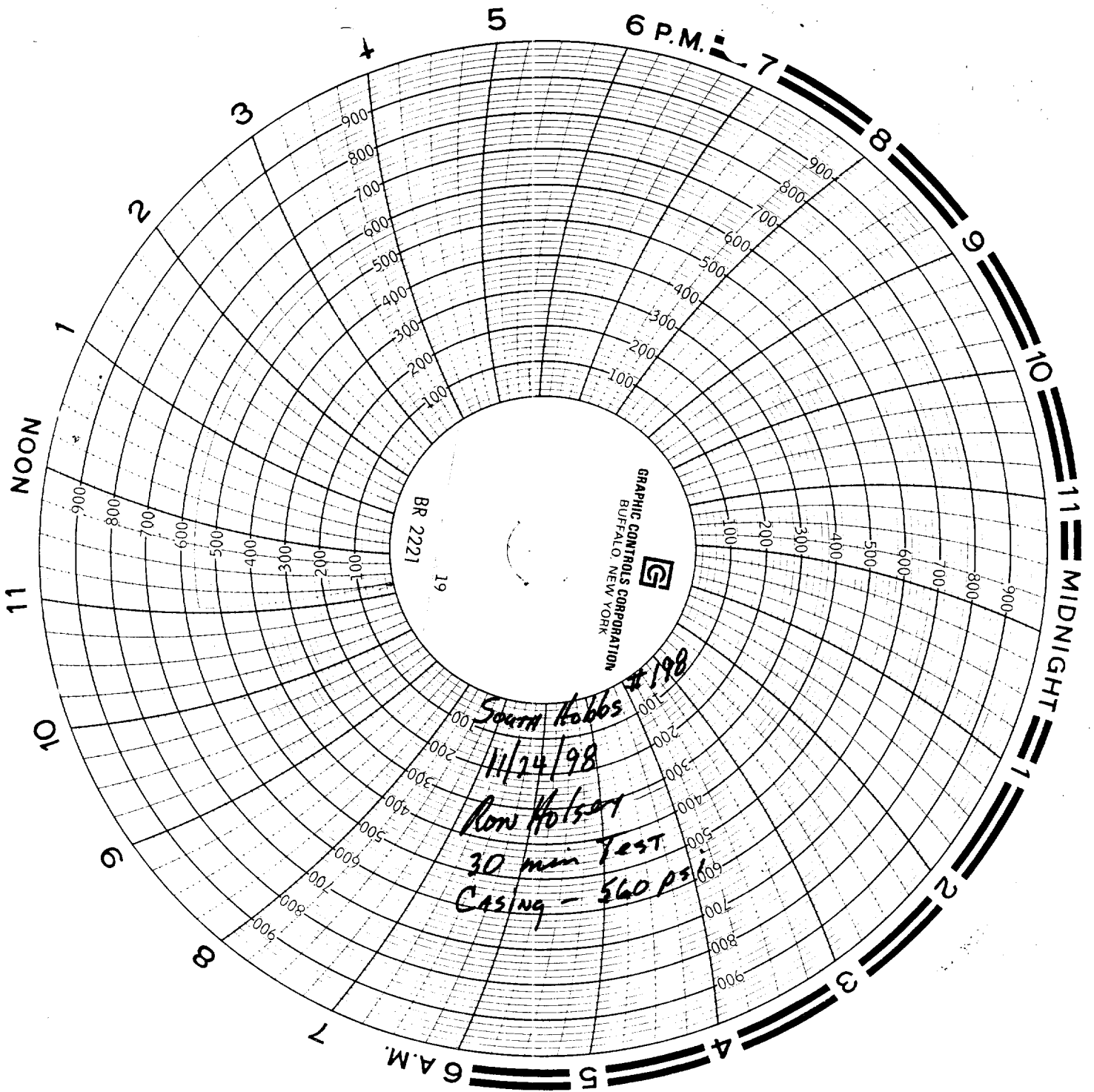
I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE <u>Robert N. Gilbert</u>	TITLE <u>LIFT SPECIALIST</u>	DATE <u>11/24/98</u>
TYPE OR PRINT NAME <u>R.N. GILBERT</u>	TELEPHONE NO. <u>505/397-8206</u>	

(This space for State Use)	ORIGINAL SIGNED BY <u>[Signature]</u>	TITLE <u>[Title]</u>	DATE <u>[Date]</u>
APPROVED BY <u>[Signature]</u>			

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State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

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WELL API NO.

30-025-29442

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

ALTURA ENERGY LTD.

3. Address of Operator

1710 WEST STANOLIND RD. HOBBS, NM 88240

505/397-8200

7. Lease Name or Unit Agreement Name

S Hobbs  
GRAYBURG/SANANDRES

8. Well No.

198

9. Pool name or Wildcat

HOBBS

GB/SA

4. Well Location

Unit Letter AC 749 Feet From The NORTH Line and 1981 Feet From The WEST Line

Section 6

Township 19-S

Range 38-E

NMPM

LEA

County

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

3648' DF

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:

☐

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.

NOTIFY THE NMOC BEFORE RIG UP. (393-6161)  
PULL OUT OF HOLE WITH PRODUCTION EQUIPMENT.  
RIH W/5.5" CSG SCRAPER TO 4125'. TOP PERF @4155'  
SET 5.5" CIBP @4100'. TEST CSG TO 500 PSI FOR 30 MIN AND CHART FOR THE NMOC. \* NOTIFY THE NMOC 24HR BEFORE  
CSG TEST.  
CIRC CSG WITH INHIBITED FLUID.  
POH W/IBG. RDPUL. CLEAN LOCATION.

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 10/22/98

TYPE OR PRINT NAME

R.N. GILBERT

TELEPHONE  
NO.

505/397-8206

(This space for State Use)

APPROVED BY

APPROVED BY  
10/22/98

TITLE

DATE