

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

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

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

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

WELL API NO.
30-025-34260-206

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

J. COOPER

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

2. Name of Operator
ME TEX OIL & GAS

8. Well No. #1

3. Address of Operator
P.O. BOX 2070

9. Pool name or Wildcat
Wildcat Abo

4. Well Location
Unit Letter B : 560 Feet From The North Line and 1864 Feet From The East Line
Section 3 Township 20S Range 37E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3561' 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: ☐

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.

CASING:

(1) 12/18/97 T.D. 7100'. Ran 5½", 15½#/ft., J-55, Total 208 Jts. - 7,179.27' set at 7,106'.

CEMENT DATA:

(2) 12/18/97 Dow/Sch. cmted. with 800 sxs. class "C", 16% Gel - 3% salt - .3% D79 - .3% D65 - .25% PPS D29; tail-in with 400 sxs. "C" cmt., .2% D65 - .5% D112 - .3% KCL. - .2% D46, Circ. to surface 104 sxs., plug down 1:50 A.M.

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

SIGNATURE Tonia Harper TITLE PRODUCTION CLERK DATE 12/18/97
TYPE OR PRINT NAME TONIA HARPER TELEPHONE NO. 397-7750

(This space for State Use) ORIGINAL SIGNED BY CHRIS WILLIAMS
DISTRICT I SUPERVISOR

DEC 23 1997

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: