

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

2040 South Pacheco
Santa Fe, NM 87505

WELL API NO.
30-025-06883

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

H S Turner

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

2. Name of Operator
Zia Energy, Inc.

8. Well No.
1

3. Address of Operator
PO Box 2510, Hobbs, NM 88241

9. Pool name or Wildcat
Eunice San Andres

4. Well Location
Unit Letter N | 330 Feet From The South Line and 2310 Feet From The West Line
Section 29 Township 21S Rang. 37E NMPM Leac County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3460

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 checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input 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.

10/6/99 POH with prd equip.
10/7 Frac with 23,000 gals and 33,000 # of 16/30.
10/8 Put back on production.

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

SIGNATURE

Scott Nelson

TITLE

Petro. Engr.

DATE

12/7/99

TYPE OR PRINT NAME

Scott Nelson

393-2937

TELEPHONE NO.

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

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