

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.
30-025-06884

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.)

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

2. Name of Operator
Zia Energy Inc.

3. Address of Operator
P.O. Box 2219, Hobbs, NM 88241

4. Well Location
Unit Letter M : 330 Feet From The South Line and 330 Feet From The West Line

Section 29 Township 21 South Range 37 East NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3472' 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.

1. Rig up well servicing unit. TOH w/ pump, rods, & tubing.
2. Install BOP. Clean out as necessary to TD 3780'.
3. TIH w/ 7" pkr. & 3½" tbg., testing to 6000#. Set pkr. @ 3600'.
4. Frac. O H 3646' to 3780' gelled brine water & sand.
5. SI for pressure to dissipate.
6. TOH w/ 3½" tbg. & pkr. Rig up & perf. add'l. zones 3450' - 3600'.
7. TIH w/ 7" pkr. & BP on 3½" tbg. Set @ 3625' & pkr. @ 3400'.
8. Breakdown perfs. w/ acid.
9. Frac. using gelled water, CO₂, and sand.
10. Open well to recover frac. load.
11. TOH w/ 3½" tbg., pkr., & BP.
12. TIH w/ 2 3/8" tbg., pump, & rods.
13. Put well on production to test.

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

SIGNATURE Farris Nelson TITLE Engineer DATE 8/18/94
TYPE OR PRINT NAME Farris Nelson 505/393-2937 TELEPHONE NO.

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE AUG 18 1994
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

AUG 18 1994

OFFICE