Submit 3 Copies
to Appropriate
District Office

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DISTRICT I OIL CONSERVATION	DIVISION	
P.O. Box 1980, Hobbs, NM 88240 2040 Pacheco St. Santa Fe, NM 87505	WELL API NO. 30-025-06983	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	sIndicate Type of Lease	
	STATE FEE	
1000 Rio Brazos Rd., Aztec, NM 87410	State OII & Gas Lease NU.	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR P		
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"	EUG BACK TO A 7Lease Name or Unit Agreement Name E. O. CARSON	
(FORM C-101) FOR SUCH PROPOSALS.) Type of Well:		
OIL GAS WELL OTHER		
2Name of Operator TITAN RESOURCES I, INC.	₀Well No. 11	
3Address of Operator 500 W. TEXAS, SUITE 500 - MIDLAND, TEXAS 79701	₅Pool name or Wildcat PADDOCK	
•Well Location	TREEGR	
Unit Letter <u>G</u> : 2051 Feet From The <u>NORTH</u> Lin	he and2051 Feet From TheEAST Line	
33 Section 21-S Township 37-E Range	NMPM LEA County	
1ºElevation (Show whether DF, RKB, I 3446' GR	₹7, GR, etc.)	
<sup>11</sup> Check Appropriate Box to Indicate Nature	of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK PLUG AND ABANDON	IEDIAL WORK	
TEMPORARILY ABANDON CHANGE PLANS COM	IMENCE DRILLING OPNS.	
PULL OR ALTER CASING	ING TEST AND CEMENT JOB	
OTHER: PERFORATE ADDITONAL PAY IN PADDOCK	IER:	
<sup>12</sup> Describe Proposed or Completed Operations ( <i>Clearly state all pertinent details, and give pertin</i> work) SEE RULE 1103.	ent dates, including estimated date of starting any proposed	
1. MIRU pulling unit. POOH with rods, pump and tubing.		
2. RU wireline truck and run GR/CNL/CCI from 5,250' to 3,000'. Perforate Upper Paddock from 5,048' to 5,072' (perfs to be selected after logging:.		
3. RIH with retrievable bridge plug and packer on tubing. Set RBP at 5,100'	, packer at 5,025'.	
4. Acidize Upper Paccock with 2,000 gals 15% NeFe HCL.		
5. Swab back until well cleans up. POOH with packer and RBP.		
6. RIH with tubing for production. Run pump and rods and put on produciton.		
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I hereby certify that the information above is true and complete to the best of my knowledge and	l belief.	
SIGNATURE IM LA MAL	RODUCTION OPERATIONS MANAGER DATE 06-16-97	
TYPE OR PRINT NAME BRUCE WOODARD	TELEPHONE NO. 915/682-6612	
(This space for State Use)	'UN 24 1097	
APPROVED BY DISTRUCTION CONTRACTORS IN TITLE	DATE	
CONDITIONS OF APPROVAL, IF ANY		