

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.
30-025-07734

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

KEO HANE

8. Well No.

9. Pool name or Wildcat

SKAYS - GRAY BUCK

1. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

2. Name of Operator

PROFESSIONAL OIL SRV.

3. Address of Operator

P.O. Box 12985 ODESSA TEXAS 79768-2985

4. Well Location

Unit Letter K : 1987 Feet From The South Line and 1971 Feet From The WEST Line

Section

6

Township

20S

Range

38E

NMPM

LEA

County

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

3588

11. 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 ☐

REMEDIAL WORK ☐

ALTERING CASING ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☒

PULL OR ALTER CASING ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

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. MI & Rn Pumping Unit. 4-23-98
2. Cut 2 3/8 TOL @ 2300', Perf @ 2300', MI&P 75 3x Class 'C' Cnt
Thru P&R. Tag Toc @ 2000'. 4-24-98
3. Perf @ 1700'. Pres up to 900', MI&P 25 3x Class 'C' Cnt
1725'-1550'. Tag Toc @ 1643'. 4-25-98
4. Perf @ 300'. MI&P 85 3x Class 'C' Cnt Down 5 1/2 Cq out
Perfs up 5 1/2 x 8 5/8 ANN TO SURF 4-25-98
5. INSTALL DRY HOLE MARKER.

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

SIGNATURE

Fely Alvaros

TITLE

VICE-PRESIDENT

DATE

4/28/98

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

APPROVED BY

James M. Lidd

TITLE

DATE