## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

|                        | <br> |
|------------------------|------|
| we, or tori's Received |      |
| HOITUBIRTEIC           |      |
| BANTA FE               |      |
| FILE                   |      |
| U.S.G.S.               |      |
| LAND OFFICE            |      |
| OPERATOR               |      |

## OIL CONSERVATION DIVISION

| NOITUBIRTEIC                                    | P. O. BOX 2088 . Form C-10:   |                                    |  |                    |  |
|---|---|------------------------------------|--|--------------------|--|
| SANTA FE  | SANTA FE, NE  | W MEXICO 87501                     |  | RC413CG 13-1-70    |  |
| FILE  |   |                                    | 5a, Indicate Type of Lease               | ]                  |  |
| U.S.O.S.  |   |                                    | 1  | •• X               |  |
| DERATOR   |   |                                    | 5. State Oil & Gas Lease No.             | •                  |  |
| <u> </u>  |   |                                    |  | m                  |  |
| SUNDR   | Y NOTICES AND REPORTS O   | N WELLS                            |  |                    |  |
| (DO NOT USE THIS FORM FOR PRO<br>USE "APPLICATI | POSALS TO BRILL OR TO DECPEN OR PLUION FOR PERMIT" (FORM C-101) FOR | UCH PROPOSALS.)                    | 7. Unit Agreement Name                   | */////             |  |
| ).<br>01L 👽 6A8                                 | 071150-   |                                    |  |                    |  |
| well X well 2. Name of Operator                 | OTHER-  |                                    | 8. Farm or Lease Name                    |                    |  |
| Kirby Exploration Compa                         | any of Texas  | ·                                  | Blankenship                              |                    |  |
| 3. Address of Operator                          | my or read-   |                                    | 9. Well No.                              |                    |  |
| P. O. Box 1885, Eunice                          | , New Mexico 88231  |                                    | 10. Field and Pool, or Wilds             |                    |  |
| 4. Location of Well                             |   |                                    |  | I'.                |  |
| UNIT LETTER E                                   | 980 FEET FROM THE North   | 1 LINE AND 660 FE                  | House and h                              | iiiii              |  |
|   |   |                                    |  |                    |  |
| THE West LINE, SECTION                          | on12 township205  | AANGE 38E                          | NWOW.                                    |                    |  |
| mmmm  | 15. Elevation (Show wheth   | her DF, RT, GR, etc.)              | 12. County                               | 77777              |  |
|   | 3564 DF   |                                    | Lea                                      |                    |  |
|   | Appropriate Box To Indicate   | Nature of Notice Report            | or Other Data                            |                    |  |
|   | Appropriate Box to indicate   | I SUBSE                            | QUENT REPORT OF:                         |                    |  |
| NOTICE OF II                                    | TENTION TO.   |                                    |  |                    |  |
| PERFORM REMEDIAL WORK                           | PLUG AND ABANDON  | REMEDIAL WORK                      | X ALTERING CASING                        |                    |  |
| TEMPORARILY ABANDON                             | _   | COMMENCE DRILLING OPNS.            | PLUG AND ABANDON                         | MENT               |  |
| PULL OR ALTER CASING                            | CHANGE PLANS  | CASING TEST AND CEMENT JOB         |  |                    |  |
|   | r   | OTHER                              |  | L_J                |  |
| OTHER   |   |                                    |  |                    |  |
| 17. Describe Proposed or Completed O            | perations (Clearly state all pertinent                              | details, and give pertinent dates, | including estimated date of starting any | y propo <b>sed</b> |  |
| work) SEE RULE 1103.                            |   |                                    |  |                    |  |
| * TOOH w/production                             | equipment. (6/3/85)   | (6/2/95)                           |  |                    |  |
| * Spot 250 gals 10%                             | MSA @ 4332' - 4082'.<br>L for correlation purpo                     | ses. (6/3/85)                      |  |                    |  |
| * Run Gamma Kay tool                            | perf in San Andres $W/1$  | JSPF @ 4274', 76, 78,              | 80, 81, 83, 85, 87, 93                   | ,                  |  |
| 0/ 05 07 /303                                   | 07 09.13.14.20.2  | 2, 24, 25, 31, 4332                | 24 noies. (0/5/05)                       | •                  |  |
| * Acid treat w/4000                             | gals 20 NEFE acid and   | divert w/63 ball seal              | ers, AIR = 4 BPM,                        |                    |  |
| ATP = 3000  psig.                               | ISIP = 2400 psig. (6/4  | ./85)                              |  |                    |  |
| * Flow back and swal                            | h to recover load. (6/  | (4/85 & .6/5/85)                   |  |                    |  |
| * Run production equ                            | ipment and place on pro   | duction. (6/6/85)                  |  |                    |  |
|   | w Mw Eddy Soay  |                                    |  |                    |  |
| * Verbal approval per                           | MI. Eddy Seay.  |                                    | •  |                    |  |
|   |   |                                    |  |                    |  |
|   |   |                                    |  |                    |  |
|   |   |                                    |  |                    |  |
|   |   |                                    |  |                    |  |
|   |   |                                    |  |                    |  |
| ·   |   |                                    |  |                    |  |
|   |   |                                    |  |                    |  |
| 18. I hereby certify that the information       | n above is true and complete to the b                               | est of my knowledge and belief.    |  |                    |  |
| $\bigcap_{\alpha}$                              | $\Omega$  | D                                  | ent DATE 8/30/85                         |                    |  |
| SIGNED DORRE NU                                 | */ TITLE  | District Superintend               |  |                    |  |
| Eddie W. S                                      | eav   |                                    | SEP 1 2 1                                | 985                |  |
| Oil & Gas Ins                                   |   |                                    | DATE                                     |                    |  |
| APPROVED BY UIT OR UUS ITTS                     | PECIAL HITCE  |                                    |  |                    |  |

RECEIVED

SEP 1 1 1985

HOBBS OFFICE