

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 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-025-07805
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 Skaggs Grayburg Unit
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1. Type of Well: OIL WELL ☐ GAS WELL ☐ X OTHER TA	8. Well No. 21
2. Name of Operator BURGUNDY OIL & GAS OF NEW MEXICO, INC.	9. Pool name or Wildcat Skaggs Grayburg
3. Address of Operator 401 W. TEXAS, SUITE 1003, MIDLAND, TX 79701-4413	
4. Well Location	

Unit Letter E : 1980 Feet From The North Line and 660 Feet From The West Line

Section 18 Township 20S Range 38E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3567' KB

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: MIT for TA'ed well ☒	

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.

6-20-97 Perform MIT per OCD R&R for TA status. TA'ed w/ CIEP SA 3710' w/ 40' cement 7-84. Tested casing to 520# for 30". Surface casing pressure 0.

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

SIGNATURE Ben Taylor TITLE Production Manager DATE 9/24/97
TYPE OR PRINT NAME Ben D. Taylor TELEPHONE NO. (915) 684-4033

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE OCT - 3 1997
CONDITIONS OF APPROVAL, IF ANY:

