

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.
30-025-08623

Indicate Type of Lease
STATE ☒ FEE ☐

State Oil & Gas Lease No.
E8322

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.)

Lease Name or Unit Agreement Name
Jalmat Field Yates Sand Unit

Type of Well:
OIL WELL ☐ GAS WELL ☐ OTHER WIW

Well No.
127

Name of Operator
Melrose Operating Co

Pool name or Wildcat
Jalmat - TN-YT-SR

Address of Operator
PO Box 5061, Midland, TX 79704

Well Location
Unit Letter B 660 Feet From The North Line and 1650 Feet From The East Line
Section 14 Township 22S Range 35E NMPM Lea County

Elevation (Show whether DF, RKB, RT, GR, etc.)
3592' 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 ANBANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: ☐

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.

12-1/4" hole w/8-5/8" csg set @ 333' & cmt w/250 sx. Circ.
7-7/8" hole w/4-1/2" csg set @ 4035' & cmt w/1175 ft3 Dincel D + 100 sx Cl C Neat. TOC by temp survey 1730'.
Perfs: 3850 - 3992'
CIBP @ 3800' w/50 sx cmt on top (TOC = 3062')

Tops: Yates 3844'
Tansil 3604'
B Salt 3604'
T Salt 1830'

Propose to P&A as follows:

Circ hole w/mud laden fl.
Spot 25 sx plug across top of salt 2030' - 1680'
Cut & pull csg from 1680'
Spot 25 sx plug 1680 - 1580' - TAG
Spot 35 sx plug 383 - 243' & tag
Spot 10 sx surface plug
Install marker & clean location.

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

SIGNATURE Bonnie Atwater TITLE Agent DATE 03-15-00

TYPE OR PRINT NAME Bonnie Atwater TELEPHONE NO. 915/685-1761

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: