

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.

30-025-08840

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.)

1. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

2. Name of Operator

Clayton Williams Energy, Inc.

3. Address of Operator

Six Desta Drive, Suite 3000 Midland, Texas 79705

7. Lease Name or Unit Agreement Name

State A AC 2

8. Well No.

53

9. Pool name or Wildcat

Eunice 7 Rvrs Queen South

4. Well Location

Unit Letter N : 660 Feet From The South Line and 1980 Feet From The West Line

Section 8 Township 22S Range 36E NMPM Lea County

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

3592

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 ABANDONMENT ☒

CASING TEST AND CEMENT JOB ☐

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.

12/07/91: Set CIBP @ 3710' w/35' cement on plug.

06/17/94: Circulated hole w/10 ppg gelled brine. Perforated 5-1/2" casing at 240.

Circulated 120 sx cement down 5-1/2" casing and up 5-1/2"/8-5/8" annulus to surface.
Cut off wellhead and anchors 3' below G.L. Set P & A marker
Cleared location of junk!

PLUGGED AND ABANDONED WELLBORE

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

SIGNATURE

David G. Grafe

TITLE Senior Prod. Engineer

DATE 07/12/94

TYPE OR PRINT NAME

David. G. Grafe

TELEPHONE NO. 682-6324

(This space for State Use)

APPROVED BY

Harry W. Wink

TITLE

FIELD REPRESENTATIVE II

DATE

7-15-94

CONDITIONS OF APPROVAL, IF ANY: