

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.	30-025-22245
5. Indicate Type of Lease	STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.	
7. Lease Name or Unit Agreement Name	McGarrity
8. Well No.	1
9. Pool name or Wildcat	East Weir Blinebry
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	3579 KB

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

TEAM EXPLORATION

3. Address of Operator c/o OIL REPORTS & GAS SERVICES  
P. O. Box 755, Hobbs, NM 88241

4. Well Location

Unit Letter N : 660 Feet From The South Line and 2310 Feet From The West Line

Section 6 Township 20S Range 38E NMMP Lea County

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: Add additional Blinebry perfs ☐

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.

1. Shoot additional Blinebry perfs: 6370, 58, 49, 44, 15, 12, 10, 08, 05; 6296, 88, 80, 74, 72, 62, 58, 56, 05; 6198, 92, 84, 75, 51, 48, 46 - 2 SPF (50 holes). Treat with 5000 gals 20% HCL. Test all Blinebry.

2. If test indicates potential, acid frac new perfs with 20,000 gals X-link 20% HCL and test.

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

SIGNATURE Donald A. Turner TITLE PRESIDENT

DATE 9-14-92  
TELEPHONE NO. 915/682-3418

TYPE OR PRINT NAME DONALD A. TURNER

(This space for State Use)  
ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY: