

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
310 Old Santa Fe Trail, Room 210
Santa Fe, New Mexico 87503

WELL API NO.

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

A.B. Reeves 1-H

8. Well No.

1

9. Pool name or Wildcat

Eunice Monument

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

Trio Oil Co.

3. Address of Operator

P.O. Box 1076 Eunice, New Mexico 88231

4. Well Location

Unit Letter G : 1650 Feet From The North Line and 230 Feet From The East Line

Section 29 Township 20S Range 37E NMPM Lea County

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

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.

7-19-94 RU Charger & Acidize 4½" X 2-3/8" W/1500 gals. of 15% NEFE Carrying
45 gals. of (AS-972) Baker Chemical & flush W/50 Bbls. 2% KCL. Acidize job
unsuccessful in increasing prod. Well bringing load back very slowly. Prior
to & after test the same.

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

SIGNATURE

James R. Evans

TITLE

Manager

DATE

7-28-94

TYPE OR PRINT NAME

James R. Evans

TELEPHONE NO. (505) 394-2506

(This space for State Use)

APPROVED BY

TITLE

DATE

AUG 01 1994

CONDITIONS OF APPROVAL, IF ANY.