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LAND OFFICE	
OPERATOR	

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input checked="" type="checkbox"/>	Fee <input type="checkbox"/>
5. State Oil & Gas Lease No.	
L-1589	
7. Unit Agreement Name	
Ojo Chiso Unit	
8. Farm or Lease Name	
Ojo Chiso Unit	
9. Well No.	
1	
10. Field and Pool, or Wildcat	
Wildcat	
12. County	
Lea	

SUNDY 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. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator
BRUNSON & MCKNIGHT, INC.
3. Address of Operator
Box 297, Hobbs, New Mexico 88240
4. Location of Well
UNIT LETTER E 1980 FEET FROM THE North LINE AND 660 FEET FROM
THE West LINE, SECTION 23 TOWNSHIP 22S RANGE 34E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.)
3482 GR

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐
PULL OR ALTER CASING ☐
OTHER ☐

PLUG AND ABANDON ☐
CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐
COMMENCE DRILLING OPNS. ☐
CASING TEST AND CEMENT JOB ☒
OTHER ☐

17. 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.

10/8/73: Ran 11,323.55 feet of 9 5/8" casing as follows:

714.28 ft. 47# S-95
3182.40 ft. 443.5# S-95
7426.87 ft. 40# S-95

Cemented first stage with 1600 sacks Halliburton Lite Cement containing .5 of 1% CFR-2 and 1/4 lb. Floccle per sack, followed by 300 sacks Class "H" containing 8 lbs. salt per sack and 1% CFR-2. Pumped plug, opened DV tool and circulated 4 hours. Cemented second stage consisting of 275 sacks Halliburton Lite Cement containing 1/2 lb. Floccle plus 5 lbs. Gilsonite per sack and 200 sacks Class "C" with 8 lbs. salt per sack. WOC 30 hrs. Tested to 1500# for 30 minutes.

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

SIGNED [Signature] TITLE President DATE 10/11/73

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: