

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.

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
LG-1207

7. Lease Name or Unit Agreement Name

Getty 2 State

8. Well No.
1

9. Pool name or Wildcat
Wildcat (Delaware)

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
Mitchell Energy Corp.

3. Address of Operator
P.O. Box 4000 The Woodlands, TX 77387-4000

4. Well Location
Unit Letter F : 1980 Feet From The North Line and 1980 Feet From The West Line
Section 2 Township 22S Range 34E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
2608' 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 ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: Recompletion ☒

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.

4/20-22/92 POOH w/2 3/8" tbg to 11,350'. Spot 35 sx Cl.H cmt plug. POOH w/tbg. RU WL. RIH & set CIBP @ 7950' & dump 30' cmt on top. Ran CBL from 6400-5400'. Tested csg & CIBP to 3000 psi. Perf Delaware 1 SPF from 5911-39' (26 shots). RIH w/RTTS & 2 3/8" tbg.

4/23/92 Acidized zone w/2500 gal 15% NEFE. Swabbed back 49 BW.

4/24-28/92 Swabbed back 119 BW, 0 BO.

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

SIGNATURE James Blount TITLE Engineer DATE 5-11-92
TYPE OR PRINT NAME James Blount TELEPHONE NO. 915-682-5396

(This space for State Use)

MAY 13 1992

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: