

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.	30-025-26772
5. Indicate Type of Lease	STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.	013832
7. Lease Name or Unit Agreement Name	
San Simon '2'	
8. Well No.	1
9. Pool name or Wildcat	Gramma Ridge, E. (MORROW)
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	
3645' KB 3614 GL	

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	2. Name of Operator Burgundy Oil & Gas of New Mexico, Inc.
3. Address of Operator 401 W. Texas, Ste 1003 Midland, Texas 79701	4. Well Location Unit Letter H : 2080 Feet From The North Line and 660 Feet From The East Line Section 2 Township 22S Range 34E NMPM Lea County
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER: <input type="checkbox"/>
SUBSEQUENT REPORT OF:	
REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER: <input type="checkbox"/>

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.

Date 1/16/96

1. POH with 2 3/8" tbg and packer
2. RIH with 2 7/8" tbg and baker 5" lok set packer.
3. Circulate packer fluid.
4. Re-perforate 12, 841 ft. to 12,848 ft.
5. Fracture treat with 29,500 gallons of Quality Alcofoam and 15,500 # of sand.
6. Flow well back. Turn down sales line.

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

SIGNATURE Rhett Gist TITLE Vice-President DATE 1/23/96

TYPE OR PRINT NAME Rhett Gist TELEPHONE NO. 684-4033

(This space for State Use)

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

CONDITIONS OF APPROVAL, IF ANY:

JAN 26 1996

