Submit 3 Copies to Appropriate District Office

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

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30-025-27464

5. Indicate Type of Lease STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

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.)

7. Lease Name or Unit Agreement Name
Patterson

1. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER

8. Well No.
1

2. Name of Operator
Tamarack Petroleum Company, Inc.

9. Pool name or Wildcat
W. Nadine Paddock Blinebry

3. Address of Operator
500 W. Texas, Suite 1485, Midland, Texas 79701

4. Well Location
Unit Letter G : 1780 Feet From The North Line and 2080 Feet From The East Line

Section 8 Township 20-S Range 38-E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3565.7 GL

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
PERFORM REMEDIAL WORK	☒	PLUG AND ABANDON	☐	REMEDIAL WORK	☐	ALTERING CASING	☐
TEMPORARILY ABANDON	☐	CHANGE PLANS	☐	COMMENCE DRILLING OPNS.	☐	PLUG AND ABANDONMENT	☐
PULL OR ALTER CASING	☐			CASING TEST AND CEMENT JOB	☐		
OTHER:	☐			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. MIRUSU. POOH with rods, pump and tubing.
2. RIH with bit scraper. POOH. RIH with treating packer. Acidize existing perfs: 5987'-6046' with 3000 gallons 15% NEFE HCl. Acidize existing perfs: 5924'-5929' with 1500 gallons 15% NEFE HCl. Swab load back.
3. POOH with treating packer.
4. RIH with perforating guns. Perforate: 5811-13-15-24-31-36-37-52-54-56-58-60-66-67-68-72-74-78-84-86-88-90-92-96, 5900-04-09-16-21. Acidize new interval with 4000 gallons 15% NEFE HCl.
5. Swab test new zone.
6. Return well to production.

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

SIGNATURE Ross E. Pearson TITLE District Engineer DATE January 29, 199

TYPE OR PRINT NAME Ross E. Pearson 915/683-5474 TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE FEB 03 1993

CONDITIONS OF APPROVAL, IF ANY: