

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

2040 Pacheco St.  
Santa Fe, NM 87505

WELL API NO.

30-025-34529

29961

Indicate Type of Lease

STATE ☒

FEE ☐

State Oil & Gas Lease No.

B-1484

### 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.)

Lease Name or Unit Agreement Name

State "H"

Type of Well:

OIL  
WELL ☒

GAS  
WELL ☐

OTHER

Name of Operator

Doyle Hartman

Well No.

3

Address of Operator

500 N. Main Street, Midland, Texas 79701

Pool name or Wildcat

Jalmat (Tansill-Yates-Seven Rivers)

Well Location

Unit Letter G : 1980 Feet From The North Line and 1980 Feet From The East Line

Section 17 Township 22-S Range 36-E NMPM Lea County

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

3574' RKB

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 to Jalmat Oil ☒


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.

Perf'd 3503'-3607' with (18) 0.44" holes AV4875 gal 15% MCA. Set C-114D-143-64 pumping unit. POP @ 9.5 x 64 x 1-1/4. 10-hr SICP = 52 psig. On 10/23/99, tested 80 MCFPD + 3.33 BWPD through 0.500" orifice plate. FCP = 5.5 psi.

Set 8-5/8" CIBP @ 3888'. SWF/236,692 + 486,520. Ran 2-7/8" O.D., 6.5 lb/ft, C-75, EUE tubing. Set C-320D-256-120 pumping unit. POP @ 12.1 x 85 x 2. On 11/15/99, tested 273 MCFPD + 29 BOPD + 385 BWPD. FCP = 29.5 psi through 0.625" orifice plate.

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

SIGNATURE



TITLE Executive Assistant

DATE 12-03-99

TYPE OR PRINT NAME Ann O'Brien

TELEPHONE NO. 915/684-4011

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY