

# MAXUS CORPORATION

WELL # 1  
TORC 12-36 STATE NO. 1

LOCATION :  
LEA COUNTY, NEW MEXICO

DATE :  
11/13/87

JOB TYPE :  
GYROSCOPIC MULTISHOT

JOB # :  
GS-1949

SURVEYOR :  
RICK EATON

DEPTHS :  
0 - 4850'

DECL. :  
9 DEGREES EAST

ELEV. :  
0'

FILE # :  
WT-0013

\*\*\*\*\*

## FINAL STATION DATA:

ND. 4650.00

TVD. 4649.59

NS -6.63

EW 19.46

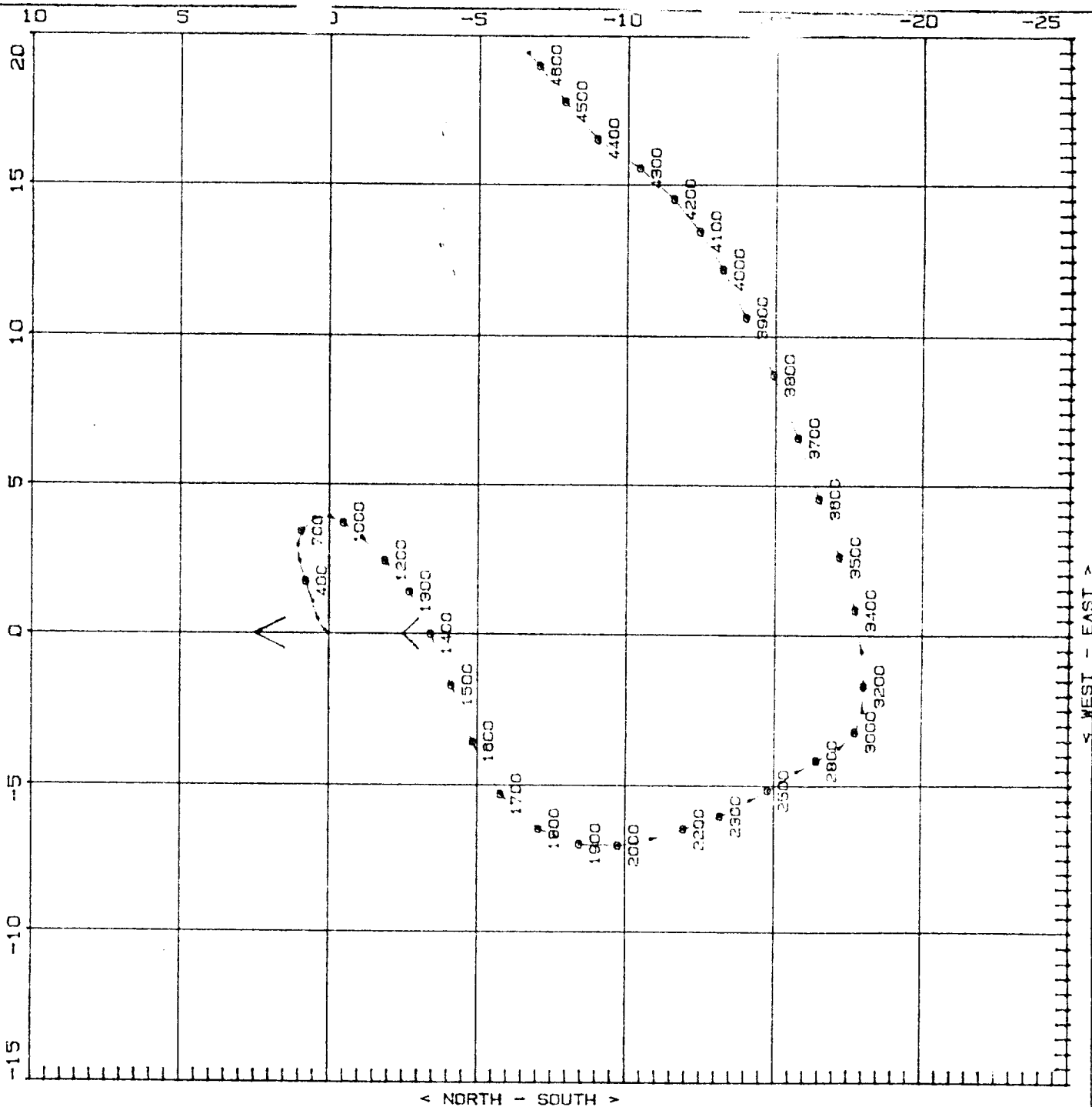
CLOSURE DISTANCE

20.56 FEET

CLOSURE DIRECTION

S 71.18 E

1 IN. = 5 FT.



STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

|                        |  |
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| OPERATOR               |  |

|                                                                                                      |
|------------------------------------------------------------------------------------------------------|
| 3a. Indicate Type of Lease<br>State <input checked="" type="checkbox"/> Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.<br>29-0090                                                              |

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- DRY HOLE                                | 7. Unit Agreement Name<br>-----                  |
| 2. Name of Operator<br>MAXUS EXPLORATION COMPANY                                                                                               | 8. Farm or Lease Name<br>Toro 12-36 State        |
| 3. Address of Operator<br>P.O. Box 10397, Midland, Texas 79702                                                                                 | 9. Well No.<br>1                                 |
| 4. Location of Well<br>UNIT LETTER L 990 FEET FROM THE West LINE AND 1980 FEET FROM<br>THE South LINE, SECTION 36 TOWNSHIP 22S RANGE 34E NMPM. | 10. Field and Pool, or Wildcat<br>Wildcat Morrow |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br>3394                                                                                          | 12. County<br>Lea                                |

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

NOTICE OF INTENTION TO:

|                                                |                                                      |
|------------------------------------------------|------------------------------------------------------|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input checked="" 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 Set Test Equipment <input checked="" type="checkbox"/> |

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.

Temporary pumping equipment was set to recover treatment fluid and test the Bone Spring Formation on March 15, 1988. It is our intention to plug and abandon this well as proposed in the following procedure:

- 1) Set 7 5/8" CIBP at 8525' w/10 sx cmt (above Bone Springs perfs 8572'-8653')
- 2) Load hole with 9.5 ppg mud & cut off 7 5/8" casing at 8450'
- 3) Pull 7 5/8" casing
- 4) Spot 60 sx cmt plug from 8500'-8400' (cut off plug)
- 5) Spot 60 sx cmt plug from 4900'-4800' (Intermediate Csg Show Plug)
- 6) Spot 50 sx cmt plug from 900'-1000' (Above salt & anhydrite section)
- 7) Spot 10 sx cmt plug at surface
- 8) Weld on steel plate and 4" x 4' dry hole marker
- 9) Fill cellar and clean up location.

THE COMMISSION MUST BE NOTICED 24 HOURS PRIOR TO THE BEGINNING OF PLUGGING OPERATIONS FOR THE C-103 TO BE APPROVED.

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

SIGNED GREG DRWENSKI TITLE Sr. Prod. Engineer DATE 04-21-88

GREG DRWENSKI

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT 1 SUPERVISOR TITLE \_\_\_\_\_ DATE APR 25 1988

CONDITIONS OF APPROVAL, IF ANY:

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P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-103  
Revised 10-1-78

|                                           |                              |
|-------------------------------------------|------------------------------|
| 5a. Indicate Type of Lease                |                              |
| State <input checked="" type="checkbox"/> | Fee <input type="checkbox"/> |
| 5. State Oil & Gas Lease No.              |                              |
| 29-0090                                   |                              |

**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. <input type="checkbox"/> OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER                                                                                         |  | 7. Unit Agreement Name                           |
| 2. Name of Operator<br>MAXUS EXPLORATION COMPANY                                                                                                                                                         |  | 8. Farm or Lease Name<br>Toro 12-36 State        |
| 3. Address of Operator<br>P.O. Box 10397<br>Midland, TX 79702                                                                                                                                            |  | 9. Well No.<br>1                                 |
| 4. Location of Well<br>UNIT LETTER <u>L</u> <u>990</u> FEET FROM THE <u>West</u> LINE AND <u>1980</u> FEET FROM<br>THE <u>South</u> LINE, SECTION <u>36</u> TOWNSHIP <u>22-S</u> RANGE <u>34-E</u> NMPM. |  | 10. Field and Pool, or Wildcat<br>Wildcat Morrow |
| 15. Elevation (Show whether DF, RT, GR, etc.)<br>3394' GR                                                                                                                                                |  | 12. County<br>Lea                                |

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data  
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

|                                                |                                           |                                                      |                                                                                       |
|------------------------------------------------|-------------------------------------------|------------------------------------------------------|---------------------------------------------------------------------------------------|
| PERFORM REMEDIAL WORK <input type="checkbox"/> | PLUG AND ABANDON <input type="checkbox"/> | REMEDIAL WORK <input type="checkbox"/>               | ALTERING CASING <input type="checkbox"/>                                              |
| TEMPORARILY ABANDON <input type="checkbox"/>   | CHANGE PLANS <input type="checkbox"/>     | COMMENCE DRILLING OPNS. <input type="checkbox"/>     | PLUG AND ABANDONMENT <input type="checkbox"/>                                         |
| PULL OR ALTER CASING <input type="checkbox"/>  | OTHER <input type="checkbox"/>            | CASING TEST AND CEMENT JOBS <input type="checkbox"/> | OTHER <u>Fracture Treatment-Bone Springs Zone</u> <input checked="" type="checkbox"/> |

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.

02-22-88 to  
02-24-88 Swab test well. Final recovery = 1 BHPD & 9 BOPD

02-25-88 Frac Bone Springs by Dowell w/94,000 gas 60# X-Line Gel, 167 tons of CO<sub>2</sub>, and 245,000# 20/40 sand. AIR 1500 psi @ 20 BPM. ISIP 1430 psi.

Total Fluid Load - 2251 bbls.

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

SIGNED CRAIG MICKLEBERRY TITLE Senior Drilling Engineer DATE 03-03-88

APPROVED BY DISTRICT 1 SUPERVISOR

CONDITIONS OF APPROVAL, IF ANY:

MAR 10 1988

RECEIVED

NOV 11 - 1988

HCBS OFFICE