

DISTRICT I
P.O. Box 1960, 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. 30-025-31267
5. Indicate Type of Lease STATE ☒ FEE ☐
6. State Oil & Gas Lease No. V-1996
7. Lease Name or Unit Agreement Name White Lightnin'
8. Well No. 1
9. Pool name or Wildcat Undes. Bootleg Ridge Morrow

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3639.1 GR

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 Collins & Ware, Inc.
3. Address of Operator 600 W. Illinois, Suite 701, Midland, Texas 79701
4. Well Location Unit Letter I : 1980 Feet From The South Line and 660 Feet From The East Line Section 19 Township 22S Range 33E NMPM Lea County

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: ☐	PLUG AND ABANDONMENT ☐
	CASING TEST AND CEMENT JOB ☒
	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.

Item (Bottom to top)	Length	Top of Section - K.B.
1 - Halliburton Guide Shoe	1.33'	4,868.67' K.B.
1 - Joint 9 5/8" 53.50#/ft., N-80 LT&C	40.95'	4,827.72' K.B.
1 - Halliburton Float Collar	1.00'	4,826.72' K.B.
79 - Joints 9 5/8" 53.50#/ft., N-80 LT&C	3364.30'	1,462.42'
37 - Joints 9 5/8" 47#/ft., N-80 LT&C	1437.42'	25.00'
117 - Total joints	4845.00'	
K.B. to G.L.	25.00'	
Casing set at	4870.00' K.B.	

Ran 10 Howco type centralizers from 4860' - 4060' (1) every other joint.

See reverse for cement and casing test.

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

SIGNATURE James F. O'Briant TITLE Agent DATE 7/31/91
TYPE OF PRINT NAME James F. O'Briant TELEPHONE NO. 915-683-5511

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

CONFIDENTIAL

AUG 03 1991