

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
310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

WELL API NO.

30-025-32993

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Family Trust

8. Well No.

1

9. Pool name or Wildcat

Wildcat

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

TMBR/Sharp Drilling Inc.

3. Address of Operator

P.O. Box 124 Midland, TX 79702

4. Well Location

Unit Letter J : 1980 Feet From The South Line and 2150 Feet From The East Line

Section 6 Township 20-S Range 38-E NMPM Lea County

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

3,577' GL

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: Shut-In ☐

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.

7-06-95 TD 7 7/8" hole @ 8,350' 8:00 AM CST. Ran Dual Induction and Density logs f/TD to 7,350' and Gamma Ray Neutron f/TD to surf.

7-07-95 Wait on orders & receive verbal approval from Paul Kautz w/NMOCD to
thru 7-10-95 temporarily abandon well for 60 days.

7-11-95 Set 8 5/8" RBP @ 3,696' and test to 500#, OK.

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

SIGNATURE

John Coffman

TITLE

Agent

DATE

7-11-95

TYPE OR PRINT NAME

John Coffman

TELEPHONE NO. 915-683-8233

(This space for State Use)

APPROVED BY

TITLE

DATE

AUG 11 1995

CONDITIONS OF APPROVAL, IF ANY: