

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. 30-025-33706
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Payday
8. Well No. 1
9. Pool name or Wildcat East Blinebry/ Warren Tubb

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	2. Name of Operator Collins & Ware, Inc.
3. Address of Operator 508 West Wall, Suite 1200, Midland, Texas 79701	4. Well Location Unit Letter L : 1980 Feet From The South Line and 660 Feet From The West Line Section 24 Township 20S Range 38E NMPM Lea County
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3570' GR	

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: Run tubing to dual complete ☒

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.

10/04/97 Wash sand from 6244 - top of RBP at 6350'. Release RBP and pull out of hole. Tubb zone on vacuum. Set Baker 45A2 Retrieval-D packer at 6455' KB. Bottom of tail assembly at 6471'. RIH with long string (306' of 2 7/8" on bottom, 6138' of 2 1/16" on top).

10/05/97 RIH with 2 1/16" (6128') to produce from Blinebry. Left tubing swinging.

10/06/97 Start swabbing and production test.

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

SIGNATURE Dianne Sumrall TITLE Production Supervisor DATE 10/17/97

TYPE OR PRINT NAME Dianne Sumrall

TELEPHONE NO. (915) 687-3435

(This space for State Use)

Eng. Signed by  
Paul Kautz  
10/17/97

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY