

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
2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.

30-025-34157

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

N/A

7. Lease Name or Unit Agreement Name

Terry

8. Well No.

1

9. Pool name or Wildcat

DK - ABO

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

Stevens & Tull, Inc.

3. Address of Operator

P.O. Box 11005, Midland, TX 79702

4. Well Location

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

Section 24 Township 20S Range 38E NMPM Lea County

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

3576 GR

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: Set Surface Casing ☒

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.

12/26/97 - Spud 12 1/4" hole @ 12:45 MST

12/27/97 - TD Surface hole @ 1584' . RIH w/39 jts - 1584' - 9 5/8" - 36# - K55 casing. Cement with 435 sx "C" + 4% gel + 2% CACL2 tail w/200 sx class "C" + 2% CACL2 - Circulated 38 sx cement to pit.

12/28/97 - WOC 12 hrs - Test BOP's to 2000 psi - tested good. Begin drilling 8 3/4" hole

12/29/97 - Install H2S Safety Equipment before topping Yates Formation

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

SIGNATURE

TITLE

Consulting Engineer

DATE

12/31/97

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

ORIGINAL

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

