

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410OIL CONSERVATION DIVISION  
2040 Pacheco St.  
Santa Fe, NM 87505WELL API NO.  
30-025-34335

5. Indicate Type of Lease

STATE ☐FEE ☒

6. State Oil &amp; Gas Lease No.

**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 &amp; Ware, Inc.

3. Address of Operator

508 West Wall, Suite 1200, Midland, Texas 79701

4. Well Location

Unit Letter N : 748 Feet From The South Line and 2089 Feet From The West LineSection 33Township 21SRange 37E

NMPM

Lea

County

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

3447 GL

7. Lease Name or Unit Agreement Name

Hare, JG

8. Well No.

12

9. Pool name or Wildcat

Penrose Skelly Grayburg

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: Perforate and treat

☒

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.

4/01/98 Tag PBD at 3927'. Pull GR/CCL from 3887 to 2500. Perforate Grayburg from 3704 - 3723 with 1 JSPF (20 holes).

4/02/98 Acidize perms 3704 - 3723 with 1800 gals of 15% Ferchek acid with 28 ball sealers. Achieved ball out.

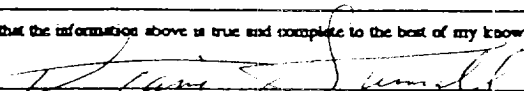
4/03/98 Fracture treat with 1019 bbls gel and 1192 sx 20/40 Ottawa sand. Reverse sand out of casing to PBD at 3927'.

4/06/98 Run 2 7/8" tubing to 3644. Run 2 1/2" x 2" x 16' RHBC pump.

4/08/98 Set American 160 - 174 - 74 pumping unit.

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

SIGNATURE



TITLE

Production Administrator

DATE

4/17/98

TYPE OR PRINT NAME

Dianne Sumrall

TELEPHONE NO.

(915)687-3435

(This space for State Use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY