

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1/1/89

OIL CONSERVATION DIVISION

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

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO.
30-025-03394

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
B-1398

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.)

7. Lease Name or Unit Agreement Name

1. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER ☐

State M

2. Name of Operator
Citation Oil & Gas Corp.

8. Well No.
1

3. Address of Operator
8223 Willow Place South, Suite 250, Houston, Texas 77070-5623

9. Pool name or Wildcat
Eummont Field Y-SR-QN

4. Well Location
Unit Letter **H** : **1980'** Feet From The **North** Line and **660'** Feet From The **East** Line
Section **1** Township **21 S** Range **35 E** NMPM **Lea** County
3547' DF

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: **Change of Well Status** ☒

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.
Citation brought this well back on production 03/91. Form C-115 has been submitted monthly since that time. Status should reflect this well as a producing oil well.

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

SIGNATURE Debra Harris TITLE **Regulatory Analyst** DATE **5-22-97**
TYPE OR PRINT NAME **Debra Harris** TELEPHONE NO. **(281) 469-9664**

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE **JUN 04 1997**

CONDITIONS OF APPROVAL, IF ANY: