STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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LAND OFFICE		
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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-

5a. Indicate Type of Lease
State ☐ Fee ☒

5. State Oil & 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. OIL WELL ☒ GAS WELL ☐ OTHER-

7. Unit Agreement Name

2. Name of Operator
Sun Exploration and Production Co.

8. Farm or Lease Name
J.A. Akens

3. Address of Operator
P.O. Box 1681, Midland, Texas 79702

9. Well No.
12

4. Location of Well
UNIT LETTER X . 660 FEET FROM THE South LINE AND 330 FEET FROM THE East LINE, SECTION 3 TOWNSHIP 21-S RANGE 36-E NMPM.

10. Field and Pool, or Wildcat
~~Undesignated~~ Hardy

15. Elevation (Show whether DF, RT, GR, etc.)
3553.0 GR

12. County
Lea

16. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐		COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	CHANGE PLANS ☐	CASING TEST AND CEMENT JOB ☒	
OTHER ☐		OTHER ☐	

17. 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.

Spud 12-3-85

12-3-85 Ran & Cmt. 9 jts. 13 3/8" 48# Csg. CS 407 Howco cmt. w/450 Sxs Class "C" +2% CaCl2l + 1/4#/sk flocele Circ. 10 Sxs cmt. to surf. WOC 6 hrs.

12-7-85 R & C 65 jts. 8 5/8" 24# CS 2700 Howco cmt. w/1050 Sxs Howco Lite 10% salt, 1/4 Flocele, tail in w/300 Sxs Class "C" 2% Cal CL2 Circ. 300 Sxs Test blind rams & csg. to 1500# Test pipe rams to 1500# for 30 min.

12-23-85 R & C 168 Jts. 5 1/2" Csg. 14# & 15.50# CS 7000 Howco cmt w/500 Sxs Howco-lite Calss "C", 10% salt, %# gilsonite per sxs, 1/4# floseal per sxs, tail in w/600 Sxs Class "H" 50-50 poz, 2% gel, 6# salt per sxs did not circ. cmt. TOC at 1200'

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

SIGNED DeAnn Kemp TITLE Assoicate Accountant DATE 1-22-86

APPROVED BY ORIGINAL SIGNED BY JERRY SEXTON DISTRICT I SUPERVISOR TITLE DATE JAN 24 1986

CONDITIONS OF APPROVAL, IF ANY: