

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/>	
5. State Oil & Gas Lease No. V-520	
7. Unit Agreement Name	
8. Farm or Lease Name Chilkat State 6	
9. Well No. 1	
10. Field and Pool, or Wildcat Wilson-Yates-Seven Riv.	
12. County Lea	

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO OPEN OR PLUG BACK TO A DIFFERENT RESERVOIR.
USE "APPLICATION FOR PERMIT -" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	
2. Name of Operator Happy Oil Company	
3. Address of Operator P.O. Box 343, Artesia, N.M. 88210	
4. Location of Well UNIT LETTER <u>W</u> <u>330</u> FEET FROM THE <u>S</u> LINE AND <u>1650</u> FEET FROM THE <u>E</u> LINE, SECTION <u>6</u> TOWNSHIP <u>21S</u> RANGE <u>35E</u> NMPM.	
15. Elevation (Show whether DF, RT, GR, etc.) <u>3684</u> GR	

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input type="checkbox"/>	
OTHER <input type="checkbox"/>	

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.

- 9-13-86 Rig up reverse unit and drill out cement and cement retainer from 3720 to 3855. Clean out to 3857 and circ out frac balls off CIBP @ 3857.
- 9-15-86 Pressure test casing to 1000#. Tih with brasijet tool and cut 3825- to 3830 Circ out sand and spot 250 gal 15% MSR. Set PKR @ 3558.
- 9-16-86 Acidize 3785-90 with 500 gal 7 1/2% NEFE. Swab back. Acidize 3825-30 with 500 gal 7 1/2% NEFE. Swab test zones.

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

SIGNED *Diana Klontz* TITLE *Production Clerk* DATE *9-22-86*
ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT SUPERVISOR
APPROVED BY _____ TITLE _____ DATE _____