

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-

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 & Production Company	8. Farm or Lease Name J.A. Akens
3. Address of Operator P.O. Box 1861 Midland, Texas 79702	9. Well No. 13
4. Location of Well UNIT LETTER <u>Q</u> . <u>2310</u> FEET FROM THE <u>South</u> LINE AND <u>330</u> FEET FROM THE <u>East</u> LINE, SECTION <u>3</u> TOWNSHIP <u>21S</u> RANGE <u>36E</u> NMPM.	10. Field and Pool, or Wildcat Hardy Drinkard
15. Elevation (Show whether DF, RT, GR, etc.) 3530.9' GR	12. County Lea

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

PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTERING CASING ☐
TEMPORARILY ABANDON ☐	CHANGE PLANS ☐	COMMENCE DRILLING OPS. ☐	PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐	OTHER ☐	CASING TEST AND CEMENT JOB ☐	
		OTHER <u>Continued completion from C-105 Form dated 10/14/86 perforated & acidized Drinkard</u> ☒	

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.

10/29/86 Perf'd Drinkard 6570-6776', 1 JSPF, 31 holes acidized perfs 6570-6776' w/3280 gals 15% acid w/60 RCN ball sealers spaced evenly thru out BDP 2000#, MP 2700#, MP 2000#, AP 2200#, FP 2500#, ISIP 2400#, 15 min SIP 0#, AIR 40 BPM ball action 2200#-2700#

10/31/86 Swabbing, 5% oil cut @ end of swab

11/4/86 RIH w/2-7/8" tbg, TS @ 6519; pkr @ 6513. Test csg to 500#, O.K., FL @ surface - 4300'. Swab line parted leaving mandrel sinker bar & 600' line in tbg.

11/5/86 Rec'd swab line & tools, well flowing down flowline w/150# tbg pressure.

11/6-11/86 Testing

11/12/86 Flowed 24 hrs, 11 BO, 101 BW, 749 MCF, 68090/1 GOR, 22/64" CK, TP 230#

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

SIGNED Maria L. Pizz TITLE Associate Accountant DATE 11/17/86

ORIGINAL SIGNED BY JERRY SEATON
DISTRICT 1 SUPERVISOR

APPROVED BY _____ TITLE _____ DATE NOV 19 1986
CONDITIONS OF APPROVAL, IF ANY: _____