

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

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

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO. 30-025-29872
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name J. A. AKENS
8. Well No. 14
9. Pool name or Wildcat HARDY DRINKARD - TUBB
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3553.1

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER
2. Name of Operator ORYX ENERGY COMPANY
3. Address of Operator P.O. BOX 2880, DALLAS, TX 75221-2880
4. Well Location Unit Letter W : 908 Feet From The SOUTH Line and 1650 Feet From The EAST Line Section 3 Township 21S Range 36E NMPM LEA
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3553.1

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: ☐

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.

ADD ADDITIONAL PERFS FROM 6554-75.  
KILL WELL WITH 2% KCL WATER AS NECESSARY.  
PERF W/4" CSG GUN 23 GM CHARGE 0.5" HOLE  
21' 2 SPF 42 HOLES.  
ACIDIZE PERFS.

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

SIGNATURE Rod L. Bailey TITLE PRORATION ANALYST DATE 11/5/93  
TYPE OR PRINT NAME ROD L. BAILEY TELEPHONE NO. 214 715-4828

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE NOV 17 1993

CONDITIONS OF APPROVAL, IF ANY: