

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. <u>30-025-30651</u>
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 <u>J. A. Akens</u>
8. Well No. <u>18</u>
9. Pool name or Wildcat <u>Hardy Tubbs Drinkard</u>
10. Elevation (Show whether DF, RKB, RT, GR, etc.) <u>3575.4' GR</u>

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 <input type="checkbox"/>
2. Name of Operator <u>ORIX ENERGY COMPANY</u>
3. Address of Operator <u>P.O. Box 2880, Dallas, TX 75221-2880</u>
4. Well Location Unit Letter <u>U</u> : <u>990</u> Feet From The <u>South</u> Line and <u>900</u> Feet From The <u>West</u> Line Section <u>3</u> Township <u>21S</u> Range <u>36E</u> NMPM <u>Lea</u> County

11. 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 JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>	

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.

2-27-92 MOVE IN RIG,  
2-28 to 3-03-92 CLEAN OUT WELL, PREPARE TO ACIDIZE  
3-3-92 ACIDIZE DRINKARD PERFS W/ 3000 GAL 15% NEFE HCL W/ 400 SCF/BBL N2 IN  
3 STAGES, PREP TO SWAB

3-4 to 3-16-92 TESTING WELL, UNTIL WELL PARTED  
3-18-92 MIRU WS RIG, FIX BOX BREAK, FISH RODS  
3-19 to 3-30-92 PUT WELL BACK ON PROD. TESTING  
3-30-92 WELL SI FOR 48HR CHEM SQZ  
4-3-92 WELL TESTED, P, 26 BO, 98 BW, 85 MCF AFTER WORKOVER  
BEFORE WORKOVER 9 BO, 19 BW, 41 MCF

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

SIGNATURE

Ewell Schirmer

TITLE

Professional Unitization Rep.

DATE

5-22-92  
(214)

TYPE OR PRINT NAME

Ewell Schirmer

TELEPHONE NO. 715-3140

(This space for State Use)

Orig. Signed by  
Paul Kautz  
Geologist

APPROVED BY

TITLE

DATE

JUN 01'92

CONDITIONS OF APPROVAL, IF ANY: