

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.	09371
	30-025-09370
5. Indicate Type of Lease	STATE ☒ FEE ☐
6. 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. Type of Well: OIL WELL ☐ GAS WELL ☒ OTHER	7. Lease Name or Unit Agreement Name State A AC 1
2. Name of Operator Clayton Williams Energy, Inc.	8. Well No. 8
3. Address of Operator Six Desta Drive, Suite 3000 Midland, Texas 79705	9. Pool name or Wildcat Jalmat Tansill Yates 7 Rvrs
4. Well Location Unit Letter 0 : 660 Feet From The West Line and -1980-1900 Feet From The East Line Section 21 Township 23S Range 36E NMPM Lea County	10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK ☐	REMEDIAL WORK ☐
TEMPORARILY ABANDON ☐	ALTERING CASING ☐
PULL OR ALTER CASING ☐	COMMENCE DRILLING OPNS. ☐
OTHER: ☐	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.

- 1) Set CIBP at $\pm$ 3270'. Dump bail 35' cement on CIBP.
- 2) Circulate hole w/10# fluid.
- 3) Spot cement plug 2984 - 2884'.
- 4) Perforate 7" at 370'. Circulate cement thru perms to surface. Leave 7" casing full of cement at surface.
- 5) Cut off wellhead, install P & A marker, cut off deadment and clean location.

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

SIGNATURE Matt Swierc TITLE Production Superintendent DATE 06/02/93
TYPE OR PRINT NAME Matt Swierc TELEPHONE NO. 682-6324

(This space for State Use)
ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT I SUPERVISOR

JUN 17 1993

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

see letter for explanation of location & #