

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.

30-025-09382

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

State A A/C 1

8. Well No.

7

9. Pool name or Wildcat

Jalmat Tansil Yates 7 Rvrs

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

2. Name of Operator

Clayton Williams Energy, Inc.

3. Address of Operator

Six Desta Drive, Suite 3000 Midland, Texas 79705

4. Well Location

Unit Letter D : 330 Feet From The North Line and 330 Feet From The West Line

Section 22

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:

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.

- 1) MIRU. Set 7" CIBP at 3125'. Dump 35' cement on CIBP.
- 2) Circulate hole w/10# bgelled brine.
- 3) Perforate at 570'.
- 4) Circulate cement through perms to surface and leave 7" full of cement.
- 5) Cut off wellhead and install P & A marker. Clean location and cut off anchors.

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

06/15/93

TYPE OR PRINT NAME

Matt Swierc

TELEPHONE NO. 682-6324

(This space for State Use)

ORIGINAL SIGNED BY 100% 50%
DISTRICT I JUN 17 1993

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

JUN 18 1993