

P.O. Box 1700, Hobbs, NM 88240

OIL CONSERVATION DIVISION

P.O. Drawer DD, Aztec, NM 87410

**P.O. Box 2088
Santa Fe, New Mexico 87504-2088**

1000 Rio Branson Rd., Aztec, NM 87410

WELL NO. 30-025-10004	
1. 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 R. L. Brunson
2. Name of Operator CROSS TIMBERS OPERATING COMPANY	8. Well No. 8
3. Address of Operator P. O. Box 52070 Midland, Texas 79710-2070	9. Pool Name or Field Blinbry
4. Well Location Unit Later <u>L</u> : <u>1,650</u> Feet From The <u>South</u> Line and <u>330</u> Feet From The <u>West</u> Line. Section <u>3</u> Township <u>22S</u> Range <u>37E</u> NEQM Lea	
10. Elevation (Show number of A.C.S. RT. CR. etc.) <u>3,437' RKB</u>	

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 OPER. ☐	PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐	OTHER: Plug Back ☒

12. Describe Proposed or Completed Operations (Carry over all pertinent details, and give pertinent details, including estimated date of starting any proposed work) SEE RULE 1102.

8-1-94 MIRU PU. POH w/2-3/8" prod tbg. Perf Blinbry 1 jspf @ 5,507'-5,807' (21 - 0.48" holes).

8-2-94 Set RBP @ 5,920'. Spot 300 gals acid across perfs. Set pkr @ 5,402'. Acidize Blinbry perfs w/2,700 gals 15% NEFE HCL acid. Swab load.

8-3-94 POH w/prod tbg. RIH w2-7/8" N-80 tbg for frac. Set pkr @ 5,414', Frac to Blinbry perfs fr/5,507'-5,807' w/37,500 gals treated wtr & 153,440# 20/40 sand. POH w/2-7/8" N-80 frac string. RIH w/pkr on 2-3/8" prod tbg.

8-5-94 to Set pkr @ 5,461'. Swab & flow load to test tank.

8-6-94 to

8-7-94

8-8-94 Connect well to flowline & start flowing to battery. RDMO PU.

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

SIGNATURE Ray F. Martin TITLE Operations Engineer DATE 8-29-94
TYPE OR PRINT NAME Ray F. Martin TELEPHONE NO.

(This space for State Use) **ORIGINAL SIGNED BY MARY SEXTON**
DISTRICT 1 SUPERVISOR

APPROVED BY _____ TITLE _____ DATE SEP 01 1994
COMPTROLLER OF APPROVAL & AFF.