

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
2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-025-10274
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 Walden, EW
8. Well No. 6
9. Pool name or Wildcat Blinebry Oil & Gas
10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3396' GR

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
Collins & Ware, Inc.

3. Address of Operator
508 W. Wall, Suite 1200, Midland, Texas 79701

4. Well Location
Unit Letter M : 731 Feet From The South Line and 731 Feet From The West Line
Section 15 Township 22S Range 37E NMPM Lea County

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
NOTICE OF INTENTION TO:	SUBSEQUENT REPORT OF:
PERFORM REMEDIAL WORK <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: <u>Plugging back to the Blinebry</u> <input checked="" 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.

11/5/96 Set CIBP at 6250' with 4 sx of cement on top. Set CIBP at 5985' with 4 sx of cement on top.

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

SIGNATURE Michelle Boone TITLE Production Clerk DATE 11/8/96
TYPE OR PRINT NAME Michelle Boone TELEPHONE NO. (915) 687-3435

(This space for State Use)

ORIGINAL SENT BY JERRY SEXTON
DISTRICT SUPERVISOR

APPROVED BY _____ TITLE _____ DATE **NOV 14 1996**

CONDITIONS OF APPROVAL, IF ANY:

JK

70 Drinkwater & Tubbs