

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.

30-025-10327

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

B-3480

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.)

7. Lease Name or Unit Agreement Name

GULF STATE

1. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

2. Name of Operator

DEKALB Energy Company

8. Well No.

1

3. Address of Operator

1625 Broadway, Denver, Colorado 80202

9. Pool name or Wildcat

Blinebry

4. Well Location

Unit Letter C : 860 Feet From The North Line and 1980 Feet From The West Line

Section

16

Township

22S

Range

37E

NMPM

Lea

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3414' GR

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.

7-6-92

MIRU pulling unit. Pull out of hole with rods and tubing. Run in hole with 5-1/2" CIBP & set at 5800'. Set 20' cement cap on top of CIBP. Ran 2-3/8" tubing. Set @ 5583'. Ran rods. Put well on production. (Well producing from perforations at 5492'-5522').

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

SIGNATURE

Debra B. Olson

TITLE

Production Analyst

DATE 7/28/92

TYPE OR PRINT NAME

Debra B. Olson

TELEPHONE NO. 303-592-460

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

JUL 31 '92

CONDITIONS OF APPROVAL, IF ANY: