

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

# NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103  
Supersedes Old  
C-102 and C-103  
Effective 1-1-65

<p align="center"><b>SUNDRY NOTICES AND REPORTS ON WELLS</b></p> <p align="center"><small>(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.)</small></p>		<p>5a. Indicate Type of Lease State <input checked="" type="checkbox"/> Fee <input type="checkbox"/></p> <p>5. State Oil &amp; Gas Lease No.</p>
<p>OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/></p> <p>6. Name of Operator <b>Sol West III</b></p> <p>7. Address of Operator <b>c/o Oil Reports &amp; Gas Services, Inc., Box 763, Hobbs, N M 88240</b></p> <p>8. Location of Well UNIT LETTER <b>G</b> <b>2310</b> FEET FROM THE <b>North</b> LINE AND <b>1650</b> FEET FROM THE <b>East</b> LINE, SECTION <b>21</b> TOWNSHIP <b>23S</b> RANGE <b>36E</b> N.M.P.M.</p>		<p>7. Unit Agreement Name</p> <p>8. Farm or Lease Name <b>Gulf Cookie State</b></p> <p>9. Well No. <b>1</b></p> <p>10. Field and Pool, or Wildcat <b>Jalmat</b></p>
<p>15. Elevation (Show whether DF, RT, GR, etc.) <b>3437.2 GR</b></p>		<p>12. County <b>Lea</b></p>

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	

17. 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.

Work began 4/18/78. Set cement retainer at 3270 and squeezed perfs 3283-88 with 200 sacks low water loss cement. Reversed out 25 sacks. Maximum squeeze pressure 1500#. WOC 24 hours. Perf 3257, 3259 and 3261 with 1 shot per foot. Spotted 200 gallons acid and let set overnight. Treated with 1,000 gallons 15% NCA. Ran 2 3/8" tubing with packer set at 3228. Swabbed well to flowing. 4/22/78 flowed 99 bbls oil, no water, 4 hours thru 24/64" choke, flowing tubing pressure 380#, GOR 3152.

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

SIGNED *[Signature]* TITLE Agent DATE 4/24/78

APPROVED BY Orig. Signed by Jerry Sexton TITLE Dist 1, Supv. DATE APR 25 1978

CONDITIONS OF APPROVAL, IF ANY: