

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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OIL CONSERVATION DIVISION

P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-73

5a. Indicate Type of Lease
State ☐ Fee ☒
5. 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. OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER- SALT WATER DISPOSAL WELL	7. Unit Agreement Name BLINEBRY-DRINKARD SWD
2. Name of Operator AGUA, INC.	8. Farm or Lease Name
3. Address of Operator P.O. BOX 1978; HOBBS, N.M. 88240	9. Well No. A-22
4. Location of Well UNIT LETTER <u>A</u> , <u>817</u> FEET FROM THE <u>NORTH</u> LINE AND <u>965</u> FEET FROM THE <u>EAST</u> LINE, SECTION <u>22</u> TOWNSHIP <u>22S</u> RANGE <u>37E</u> N.M.P.M.	10. Field and Pool, or Wildcat SAN ANDRES
15. Elevation (Show whether DF, RT, GR, etc.) 3352' G.L.	12. County LEA

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 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"/>	OTHER <input checked="" type="checkbox"/> ACID STIMULATION

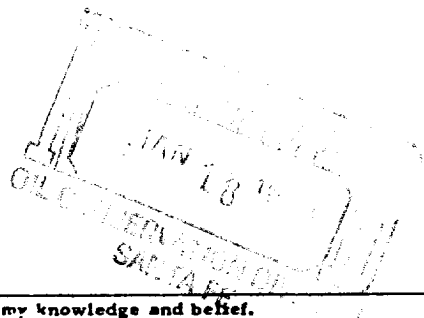
17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

OCTOBER 26, 1988

ARRIVE ON LOCATION. PUMP 24 BBLs. PREFLUSH (FRESH WATER W/5 GALS. BAKER AQUA-SURF 10-TA), 5000 GALS. 15% NEFE ACID, AND 90 BBLs. FLUSH (PRODUCED WATER). MINIMUM TP=1100; MAXIMUM TP=1175 PSI. SHUT IN FOR 1 HOUR. PLACE WELL BACK ON INJECTION.

OCTOBER 27, 1988

TP=900 PSI CP=1250 PSI



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

SIGNED R. W. ABBOTT R.W. ABBOTT TITLE MANAGER DATE 1/16/89

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT SUPERVISOR

JAN 24 1989

APPROVED BY 321 TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED

JAN 23 1989

QCD
HOMES OFFICE