

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.

30-025-30607

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

HINTON

8. Well No.

7

9. Pool name or Wildcat

WANTZ GRANITE WASH

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

ZACHARY OIL OPERATING COMPANY

3. Address of Operator

P. O. BOX 1969, EUNICE, NEW MEXICO 88231

4. Well Location

Unit Letter I : 1650 Feet From The SOUTH Line and 660 Feet From The EAST Line

Section 12 Township 22S Range 37E NMPM LEA County

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

3333.0 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.

4-30-89---Spud 12 $\frac{1}{4}$ " hole

5-3-89---Run 1260' of 8-5/8"-24# csgn for surface csgn--cemented with 780 sx of class "C" cement with 2% calcium chloride--cement circulated to surface. WOC 18 hrs. Pressured to 1000# & held for 30 min. Held OK.

5-18-89---Run 7592' of 5 $\frac{1}{2}$ "-17# csgn & cemented with 945 sx of POZ A--790 sx of Pacesetter light & 200 sx of Premium Neat cement. Cement circulated to surface. WOC 72 hrs. Pressured to 2000# for 30 min. Held OK.

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

SIGNATURE Ray A. Pierce

TITLE Prod. Supt.

DATE 6-18-89

TYPE OR PRINT NAME RAY A. PIERCE

TELEPHONE NO. 394-2150

(This space for State Use) **ORIGINAL SIGNED BY JERRY SEXTON**
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

JUL 05 1989

RECEIVED

JUL 3 1989

OCD
HOBBS OFFICE