

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

2040 Pacheco St.
Santa Fe, 87505

WELL API NO.

30-025-33825

5. Indicate Type of Lease

STATE ☐

FEE ☒

6. 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.)

7. Lease Name or Unit Agreement Name

Brunson-Argo

1. Type of Well:

OIL
WELL ☒

GAS
WELL ☐

OTHER

2. Name of Operator

Titan Resources I, Inc.

8. Well No.

22

3. Address of Operator

500 W. Texas, Suite 500, Midland, Texas 79701

9. Pool name or Wildcat

Wantz Abo

4. Well Location

Unit Letter C : 700 Feet From The North Line and 1750 Feet From The West Line

Section 10 Township 22S Range 37E NMPM Lea County

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

3416 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.

5-8-97 Spud 12 1/4" hole.

5-9-97 Depth 1140'. Ran 25 jts 8 5/8", 24 lb/ft, J-55, ST&C casing. Set at 1138'.
Cemented with 450 sx B J Lite plus 100 sx Class "C" with 2% CaCl₂. Circulated
90 sx to surface.

5-10-97 WOC 18 hrs. Tested casing and BOP to 1,000 psi. Drilled out with 7 7/8" bit.

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

SIGNATURE

Ron Lechwar

TITLE

Project Manager

DATE

5/13/97

TYPE OR PRINT NAME

Ron Lechwar

(915)682-6612

TELEPHONE NO.

(This space for State Use)

Orig. Signed by
Paul Kautz
Geologist

MAY 21 1997

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: