

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, NM 87505

WELL API NO. 30-025-33994
Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
State Oil & Gas Lease No.
Lease Name or Unit Agreement Name BRUNSON-ARGO
Well No. 26
Pool name or Wildcat WANTZ ABO

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.)	
Type of Well: OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER	
Name of Operator TITAN RESOURCES I, INC.	
Address of Operator 500 W. TEXAS, SUITE 500, MIDLAND, TX 79701	
Well Location Unit Letter <u>D</u> : <u>990</u> Feet From The <u>NORTH</u> Line and <u>660</u> Feet From The <u>WEST</u> Line Section <u>10</u> Township <u>22 S</u> Range <u>37 E</u> NMPM LEA County	
Elevation (Show whether DF, RKB, RT, GR, etc.) 3409 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 ANBANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: TD and run Production casing ☒

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.

7/12/97 Drill 8-3/4" hole to 7361 ft. TD 1:30 PM 7/12/97

7/13/97 Ran 171 joints 7", 26 lb/ft, L-80 and K-55, LT&C casing. Casing set at 7333 ft KB. DV tool set at 3964 ft. Cemented 1st stage with 860 sx Class "C" 50:50 Poz. Opened DV tool and circulated 115 sx to surface. Cemented 2nd stage with 1070 sx Class "C" 65:35 Lite, followed by 100 sx Class "C" neat. Circulated 55 sx to surface.

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 07-21-97

TYPE OR PRINT NAME RON LECHWAR

TELEPHONE NO. 915/682-6612

(This space for State Use)

ORIGINAL SIGNED BY CHRIS WILLIAMS
DISTRICT I SUPERVISOR

AUG 19 1997

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: