

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 South Pacheco
Santa Fe, NM 87505

WELL API NO.
30-025-34043

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

Simmons

1. Type of Well:

OIL WELL ☒ GAS WELL ☐ OTHER

2. Name of Operator

Zia Energy, Inc.

8. Well No.

3

3. Address of Operator

PO Box 2510, Hobbs, NM 88241

9. Pool name or Wildcat

Penrose Skelly Grayburg

4. Well Location

Unit Letter G 1650 Feet From The North Line and 1650 Feet From The East Line

Section 5 Township 22S Rang. 37E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3438

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK ☒ ALTERING CASING ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐ COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
PULL OR ALTER CASING ☐ CASING TEST AND CEMENT JOB ☐
OTHER: ☐ 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.

7/13/00 RUPU.

8/1 Drilled out cement at 3072'. Tagged next plug at 4109'. Ran 93 jts of 5 1/2" 15.5# casing to 4035'. Cemented with 330 sacks of cement.

8/2 Ran Temp survey. TOC @ 1820'.

8/3 Perforated 3660-3700' with 2 JSPF.

8/4 Acidized with 2000 gals of 15% acid.

8/5 Fracture treated with 32,000 gals and 30,000 lbs. Screened out.

8/7 Put on pump.

8/21 RUPU. Re-perf 3660-3700.

8/22 Acidized with 2000 gals of 15% and fracture treated with 50,000 gals and 100,000 lbs.

8/23 Return to production and test.

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

SIGNATURE

Scott Nelson

TITLE

Engineer

DATE

8/28/00

TYPE OR PRINT NAME

Scott Nelson

505-393-2937

TELEPHONE NO.

(This space for State Use)

APPROVED BY

OFFICIAL NAME

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

2A SW Eunice SA

