

Submit 3 Copies

to Appropriate

District Office

DISTRICT I

PO Box 1980, Hobbs, NM 88241-1980

DISTRICT II

PO Drawer DD, Artesia, NM 88210

DISTRICT III

1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103

Revised 1-1-89

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-025-24432
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. K-3018
7. Lease Name or Unit Agreement Name Ingram "O" State
8. Well No. 2
9. Pool name or Wildcat

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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER SWD	
2. Name of Operator Primal Energy Corporation	
3. Address of Operator 222 Pennbright, Suite 116, Houston, TX 77090	
4. Well Location Unit Letter <u>E</u> <u>1980</u> Feet From The <u>North</u> Line and <u>660</u> Feet From The <u>West</u> Line Section <u>7</u> Township <u>24S</u> Range <u>33E</u> NMPM Lea County	
10 Elevation (Show whether DF, RKB, RT, GR, etc.) 3563'GR	

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 & ABANDONMENT ☐
CASING TEST & CEMENT JOB ☐
OTHER: Mechanical Integrity Test ☒

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.

1. Work performed on 2/28/97
2. Load tubing/casing annulus and pressure to 520 psig. Held for 30 minutes.
3. Test witnessed by Mr. Charlie Perrin with NMOCD who took pressure chart with him.

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

SIGNATURE

TITLE Manager, Operations & Engineering

DATE 3/15/97

TYPE OR PRINT NAME

TELEPHONE NO. 281-875-5100

(This space for State Use)

ORIGINAL SIGNED BY

GARY WINK
FIELD REP. II

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

MAR 20 1997