

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 11-89

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION  
P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO. 30-025-32511
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
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.)

1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER Dry Hole	7. Lease Name or Unit Agreement Name Hunt 26
--	---

2. Name of Operator Samedan Oil Corporation	8. Well No. 1
--	---------------

3. Address of Operator 12600 Northborough, #250, Houston, TX 77067	9. Pool name or Wildcat Langlie Mattix; 7 Rvrs Q. Grayburg
---	---

4. Well Location Unit Letter <u>C</u> : <u>1050</u> Feet From The <u>North</u> Line and <u>1650</u> Feet From The <u>West</u> Line Section <u>26</u> Township <u>23-S</u> Range <u>37-E</u> NMPM Lea County
---

10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3262 GR
---

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>		OTHER: _____ <input type="checkbox"/>	

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.

- 1/15/99 Set CIBP @ 3600'
- 1/18/99 Circulate w/10# mud. Pump 25 sx cmt from 3600' to 3348'. POH to 3136'. Pump 25 sx cmt from 3136'-2884'. POH w/tbg. Freepoint csg and cut off 5 1/2 @ 2023'. POH and lay down 48 jts (2023') of 5 1/2" csg.
- 1/19/99 TIH w/tbg to 2073'. Circulate well. Pump 30 sx "C" cmt. POH w/tbg. WOC 3+ hrs. Tag cmt @ 1940'. RIH w/tbg to 1100'. Pump 30 sxs "C" cmt. from 1100' to 990'. POH to 410'. Pump 30 sx "C" cmt. from 410' to 300'. POH to 40'. Pump 10 sx "C" from 40' to 5'.
- 1/20/99 Cut off well head and cleaned loc. Weld dry hole marker.

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

SIGNATURE Judy Throneberry TITLE Regulatory Coordinator DATE 01/22/99  
 TYPE OR PRINT NAME Judy Throneberry (281) 876-6150 TELEPHONE NO.

(This space for State Use)  
 APPROVED BY [Signature] TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
 CONDITIONS OF APPROVAL, IF ANY

JC SWW

df