

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

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

WELL API NO.

30-025-35068

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

V-4396-2

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 ☐

GAS
WELL ☒

OTHER

2. Name of Operator

MURCHISON OIL & GAS, INC.

3. Address of Operator

1445 ROSS AVE., STE. 5300, LB 152
DALLAS, TX. 75202-2883

8. Well No.

3

9. Pool name or Wildcat

JOHNSON RANCH WOLFCAMP

4. Well Location

Unit Letter F : 1650 Feet From The NORTH Line and 2550 Feet From The WEST L

Section 9

Township 24S

Range 33E

NMPM

LEA

County

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

3584 GL

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: PRODUCTION CASING ☐

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.

Drilled 6-1/8" hole to 13600'. Condition and circulate hole with 13 PPG mud and run open hole logs. Ran casing as follows:

2 JTS	3-1/2"	9.3	P-110	LTC	BOTTOM
269 JTS	3-1/2"	10.3 #/FT	C-75	CS HYD	
167 JTS	3-1/2"	10.3 #/FT	L-80	CS HYD	TOP

Cemented w/ 400 SXS Class "C" + GPS D600+ .05047 + .1% D153 + .15 GAL/SX D604 AM + .02 GAL/SX D801. Bump Plug at 12:00 noon. Float held. Release rig 11:00 pm 9/16/00.

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

SIGNATURE

Michael S. Daugherty

TITLE

V.P. OPERATIONS

DATE 9/19/00

TYPE OR PRINT NAME

MICHAEL S. DAUGHERTY

TELEPHONE NO. 953-141 (214)

(This space for State Use)

APPROVED BY

TITLE

ORIGINAL SIGNED BY CHRIS WILLIAM
DISTRICT SUPERVISOR

DATE SEP 25 2000

CONDITIONS OF APPROVAL, IF ANY:

