

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

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|---|
| WELL API NO. 30-025-11830 |
| 5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> |
| 6. State Oil & Gas Lease No. |
| 7. Lease Name or Unit Agreement Name Gutman SWD |
| 8. Well No. 2 SWD |
| 9. Pool name or Wildcat Langlie Mattix |

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.)

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|---|
| 1. Type of Well: OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> X OTHER SWD |
| 2. Name of Operator Midland Operating, Inc. |
| 3. Address of Operator 3300 North "A", 2-104, Midland, TX 79705 |
| 4. Well Location Unit Letter J : 2310 Feet From The South Line and 1650 Feet From The East Line Section 29 Township 25-S Range 37-E NMPM Lea County |
| 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3028 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"/> | REMEDIAL WORK <input type="checkbox"/> |
| TEMPORARILY ABANDON <input type="checkbox"/> | ALTERING CASING <input type="checkbox"/> |
| PULL OR ALTER CASING <input type="checkbox"/> | COMMENCE DRILLING OPNS. <input type="checkbox"/> |
| OTHER: <input type="checkbox"/> | PLUG AND ABANDONMENT <input type="checkbox"/> |
| | CASING TEST AND CEMENT JOB <input type="checkbox"/> |
| | OTHER: Perform 5 Yr Casing Test <input checked="" 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.

2-25-2000 MIRUPU, Pull tubing and packer, found packer was bad. Clean out to TD. Run new packer and tested tubing in hole.

2-26-2000 Test casing to 380 psi for 30 minutes while running chart. Held OK.

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

SIGNATURE Victor J. Sirgo TITLE President DATE 4-6-2000

TYPE OR PRINT NAME Victor J. Sirgo TELEPHONE NO. 915-570-0077

(This space for State Use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

ICS

RECEIVED
Hobbs
OCD