

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

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. _____

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.)

1. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER _____
2. Name of Operator
Lewis B. Burleson, Inc.
3. Address of Operator
P.O. Box 2479 Midland, TX 79702
4. Well Location
Unit Letter M : 660 Feet From The South Line and 330 Feet From The West Line

7. Lease Name or Unit Agreement Name
Jenkins

8. Well No.
1

9. Pool name or Wildcat
Jalmar Yates - SR
Tansill

Section 29 Township 25-S Range 37-E NMMP Lea County
10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3041' DF

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.

- 2-13-92
1. Install BOP. Run in hole and set 5 1/2" CIBP @2650'. Circulate hole with mud. Spot 5 sacks cement 2650' - 2605'
 2. Spot 15 sacks cement @540' - 398'.
 3. Spot 10 sacks cement @ 96' - surface.
 4. Install marker. Clean location.

Approved as to plugging of the Well Bore.
Liability under bond is retained until
surface restoration is completed.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.
SIGNATURE Wayne Jarvis TITLE Superintendent DATE 2-24-92
TYPE OR PRINT NAME Wayne Jarvis TELEPHONE NO 915/683-4747

(This space for State Use)
APPROVED BY GARY W. WINK TITLE _____ DATE MAR 04 2003
CONDITIONS OF APPROVAL, IF ANY: OC FIELD REPRESENTATIVE II/STAFF MANAGER



RECEIVED

FEB 26 1992

300 HUBBS OFFICE