

Submit 3 Copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

OIL CONSERVATION DIVISION

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

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

WELL API NO.

30-025-0408

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.)

7. Lease Name or Unit Agreement Name

1. Type of Well:

OIL  
WELL ☒

GAS  
WELL ☐

OTHER

Persons

2. Name of Operator

Trio Oil Company

8. Well No.

1

3. Address of Operator

c/o Oil Reports & Gas Services, Inc., P.O. Box 755, Hobbs, NM

9. Pool name or Wildcat

Lumont

4. Well Location

Unit Letter I : 1980 Feet From The South Line and 660 Feet From The East Line

Section

27

Township

19S

Range

36E

NMPM

Lea

County

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

3697 GR

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: Run liner & perforate ☒

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.

It is proposed to clean out open hole to 4020, run 4" 11# liner from 3700 to 4020, cement with 25 sacks Class C cement, perf 3776 to 3998 with 30 shots and treat with 60,000 gallons gel water and 100,000# sand. Return to production.

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

SIGNATURE

Donna Holley

TITLE

Donna Holley - Agent

DATE 9/14/93

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

APPROVED BY

TITLE

DATE SEP 15 1993

CONDITIONS OF APPROVAL, IF ANY: