

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 <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 Water Injection	7. Lease Name or Unit Agreement Name  Black
2. Name of Operator Citation Oil & Gas Corp.	8. Well No. 5
3. Address of Operator 8223 Willow Place South Ste 250 Houston, TX 77070	9. Pool name or Wildcat Langlie Mattix 7 Rvrs QGB
4. Well Location Unit Letter N : 1300 Feet From The North Line and 1340 Feet From The West Line Section 21 Township 24 S Range 37 E NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	

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

On 7-12-92, Citation sqz'd csg leaks from 516'-933' w/150 sx Class "C" cmt w/2% CaCl<sub>2</sub> + 0.5% HALAD 344. Displaced 2.5 bbl cmt w/87.5 sx cmt outside 4 1/2" csg. TOC @ 127'. Drilled out cmt. Mixed & pumped 50 sx "C" w/ .6% HALAD 344. Spot balanced plug from 235'-956'. TOC@300'. Drilled out cmt and CIBP. PBTD @ 3700'. RIH w/tbg and pkr to 3342'. Mixed & pumped 40 BFW w/25 gal Champion Cortron 2264. Pressure tested annulus to 300 psi for 30 min. Ran Mechanical integrity test. Placed well on injection 7-21-92.

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

SIGNATURE Sharon Ward TITLE Prod. Reg. Supv. DATE 8-4-92

TYPE OR PRINT NAME Sharon E. Ward TELEPHONE NO. (713) 469-9664

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

AUG 07 '92