

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. <u>30025-25329</u>
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  King Foundation et al
8. Well No.  1
9. Pool name or Wildcat Jalmat, Tansill, Yates, 7R

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 checked="" type="checkbox"/> OTHER	
2. Name of Operator Tahoe Energy, Inc.	
3. Address of Operator 3909 W. Industrial, Midland, Texas 79703	
4. Well Location Unit Letter <u>E</u> : <u>2310</u> Feet From The <u>North</u> Line and <u>330</u> Feet From The <u>West</u> Line Section <u>20</u> Township <u>24-S</u> Range <u>37-E</u> NMPM Lea County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) <u>3294</u>	

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data	
<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> OTHER: <u>Re-Completion</u> <input checked="" type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER: <input 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.

This well by Order No. R-9098 is part of the 240 acre non-standard gas proration unit previously approved by Order No. R-2867 and is authorized to simultaneously dedication to the unit and the gas allowable assigned the unit.

- 1.) Plug back in 4½" csg. to 3515'.
- 2.) Perforate Yates and Seven Rivers formations.
- 3.) Acidize the perforations with 4,000 gal 15% Swb. back & test.
- 4.) Fracture treat w/50,000 gals (50% CO<sub>2</sub>) w/95,000# sand.
- 5.) Blow back and clean up. Put on rod pump if required.
- 6.) Potential well and place on production in El Paso Natural Gas pipeline.

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

SIGNATURE K. A. Freeman TITLE President DATE 1/19/90

TYPE OR PRINT NAME K. A. Freeman TELEPHONE NO. 915/697-7938

(This space for State Use)

ORIGINAL SIGNED BY JEANIE TOLSON  
DISTRICT I SUPERVISOR

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE FEB 09 1990

CONDITIONS OF APPROVAL, IF ANY: