

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.
30-025-25753

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

Smith

1. Type of Well:
OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. Name of Operator
Lewis B. Burleson, Inc.

8. Well No.
2

3. Address of Operator
P.O. Box 2479 Midland, Texas 79702

9. Pool name or Wildcat
Langlie Mattix

4. Well Location
Unit Letter P : 330 Feet From The South Line and 990 Feet From The East Line

Section 4 Township 25-S Range 37-E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3172 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: ☐

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.

1-9-95 - Set retainer at 3400'. Squeeze with 50 sacks cement. Spot 40 sacks on top of retainer.

1-10-95- Tag cement at 2800'. Perforate 4 1/2" casing at 1125'. Unable to pump into perfs. Spot 25 sack plug at 1175'.

1-11-95- Tag cement at 693'. Spot 12 sack plug at surface. Pump 50 sacks between 8 5/8" and 4 1/2".

1-12-95- Cut off wellhead. Install marker.

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

SIGNATURE

TITLE

DATE

1-26-95

TYPE OR PRINT NAME

TELEPHONE NO.

(This space for State Use)

OIL & GAS INSPECTOR

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: