State of New Mexico Submit 3 Copies Form C-103 Ainerals and Natural Resources Department to Appropriate Revised 1-1-89 District Office DISTRICT I OIL CONSERVATION DIVISION P.O. Box 1980, Hobbs, NM 88240 WELL API NO. P.O. Box 2088 30.025 DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210 5. Indicate Type of Lease 1000 Rio Brazos Rd., Aztec, NM 87410 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 7. Lease Name or Unit Agreement Name DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) Type of Well: WELL WELL X Sherrel1 2. Name of Operator Well No. <u>Doyle Hartman</u> 9 3. Address of Operator 9. Pool name or Wildcat 0. Box 10426. Midland, Texas 79702 Jalmat (Tansil-Yates-7R) Well Location South 1650 East Unit Letter _ Feet From The Line and Feet From The Line 24-S 37-E Section Township Lea **NMPM** County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) 3224 GL Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data 11. 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. RU Halliburton Well Service. Fracture stimulate well with 78,600 gals gelled water + 78,600 gals CO2 combined as a 50-50 quality foam and carrying 42,500 # 20/40 sand + 142,000 #12/20 sand + 151,500 #8/16 sand at an average rate of 39.35 BPM down the casing, tubing annulus at an average pressure of 2114 psig. ISIP 970 psig, 5 min. SIP 890 psig, 15 min. SIP 830 psig. Flow well back to pit to recover load. Waiting on pipeline connection to NNG's Lea County system.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE TYPE OR PRINT NAME Michael Stewart Michael Stewart TELEPHONE NO. 915/684-4011	(This space for State Use) GRIGINAL SIGNED BY JERRY SEXTON APPROVED BY DISTRICT I SUPERVISOR	TTV B	NOV 2 7 1989
Figure Figure 11 21 90	TYPEOR PRINT NAME Michael Stewart		TELEPHONE NO. 915/684-4011
	1/1/5/1		DATE11-21-89

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: