

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

OIL CONSERVATION DIVISION

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO.

30-025-30300

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

B-9311

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

West Dollarhide Queen Sand
Unit

1. Type of Well:

OIL
WELL ☐

GAS
WELL ☐

OTHER Water Injection

2. Name of Operator

Sirgo Operating, Inc.

8. Well No.

143

3. Address of Operator

P.O. Box 3531, Midland, Texas 79702

9. Pool name or Wildcat

Dollarhide Queen

4. Well Location

Unit Letter J : 1880 Feet From The South Line and 2140 Feet From The East Line

Section 32

Township 24S

Range 38E

NMPM

Lea

County

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

3181' GR

11.

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: Start injection ☒

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.

2-19-90 Start RIH w/AD-1 injection pkr & 2-3/8" tbg.
2-20-90 Finish RIH w/pkr & tbg. Set pkr @ 3586' & tbg @ 3584'.
Circ 100 bbls 2% KCL w/1 drum WT-1270 pkr fluid. Load & test
backside to 500# for 30 min - tested okay. NU wellhead.
Tie into injection lines & test. Repaired one leak in line.
2-21-90 Tie into header & start injecting. Inject w/755 BWPD @ 1350# psi.

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

SIGNATURE Bonnie Atwater TITLE Production Technician DATE 3-14-90

TYPE OR PRINT NAME Bonnie Atwater TELEPHONE NO. 915/685-0878

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON

APPROVED BY DISTRICT I SUPERVISOR TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

MAR 16 1990