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JUN 26 1979

O. C. C.

ARTESIA, OFFICE

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.)

5a. Indicate Type of Lease State <input type="checkbox"/> Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.
7. Unit Agreement Name
8. Farm or Lease Name Malaga
9. Well No. 1
10. Field and Pool, or Wildcat Malaga Morrow
12. County Eddy

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator MADDOX ENERGY CORPORATION
3. Address of Operator Permian Bldg., Suite 511, Midland, Texas 79701
4. Location of Well UNIT LETTER G, 1980 FEET FROM THE North LINE A, 1980 FEET FROM THE East LINE, SECTION 3 TOWNSHIP 24-S RANGE 28-E NMPM.

15. Elevation (Show whether DF, RT, GR, etc.)
3041' KB

16. 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"/>
TEMPORARILY ABANDON <input type="checkbox"/>	COMMENCE DRILLING OTHER <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>
OTHER <input type="checkbox"/>	OTHER Progress <input checked="" type="checkbox"/>
PLUG AND ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
CHANGE PLANS <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>

17. 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.

PLEASE SEE ATTACHED REPORT.

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

SIGNED A. S. Green

TITLE Secretary/Agent

DATE June 22, 1979

APPROVED BY W. A. Gussett

TITLE SUPERVISOR, DISTRICT II

DATE JUN 27 1979

CONDITIONS OF APPROVAL, IF ANY: