Submit 3 Copies to Appropriate District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

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VELL API NO.			•
30-015-28383	<u> </u>		
5. Indicate Type of Le		r	7
	STATE	FEE	لــــــــــــــــــــــــــــــــــــــ

DISTRICT I P.O. Box 1980, Hobbs, NM 88240 OIL CONSERVATION DI P.O. Box 1980, Hobbs, NM 88240	VISION WELL API NO.	
P.O. Box 1980, Hoose, NM 88240 P.O. Box 2088 DISTRICT II Santa Fe, New Mexico 87504-	2088 30-015-28383	
P.O. Drawer DD, Artesia, NM 88210	5. Indicate Type of Lease STATE FEE x	
DISTRICT III 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 PLU- DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	7. Lease Name or Unit Agreement Name Fairchild 13	
1. Type of Well: OIL GAS WELL X WELL OTHER		
2. Name of Operator	8. Weil No.	
Nearburg Producing Company	#5	
3. Address of Operator	9. Pool name or Wildcat	
P. O. box 823085, Dallas, TX 75382-3085 4. Well Location	Dagger Draw; Upper Penn, North	
Unit Letter H: 1,980 Feet From The North L	ine and 660 Feet From The <u>East</u> Line	
Section 13 Township 19S Range 25	E NMPM Eddy County	
10. Elevation (Show whether DF, RKB, 3,401' GR	RT, GR, etc.)	
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 REMEI	DIAL WORK ALTERING CASING	
TEMPORARILY ABANDON CHANGE PLANS COMM	COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT	
PULL OR ALTER CASING CASIN	CASING TEST AND CEMENT JOB	
OTHER: Extension Request X OTHER	R:	
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give per work) SEE RULE 1103.	tinent dates, including estimated date of starting any proposed	
Request and extension of original application appr	oved on 03/13/95.	
	PARTICIPATION	
PERIVITIES DRILLING UNDERN	0,XYR 6 SEP 07 1995	
PERVICE SAPINES STUDEN	NAY	
UNLEGG DRILLING OF		
	ONST. 2	
Application Expire	D 937-96	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIGNATURE Taulette Stouston TITLE	Admin. Assnt DATE 09/05/95	
TYPEOR PRINT NAME Paulette Houston	TELEPHONE NO. 505/397-418	
(This space for State Use) ONEGRADAL SECRET TY THE DA CHAS	SEP 11 1995	
DISTRICT II SCREWESSE THE	DATE	

APPROVED BY --

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