Submit 3 Copies to Appropriate District Office

11.

OTHER:

## State of New Mexico Er

Form C-103

	RIC				
P.O.	Box	1980,	Hobbs,	NM	8824

to Appropriate District Office	Energy, Minerals and Natural Re	sources Department	and the second second	Revised 1-1-89
DISTRICT I P.O. Box 1980, Hobbs, NM 88240	OIL CONSERVATION DIVISION P.O. Box 2088		WELL API NO.	
DISTRICT II Santa Fe, New Mexico 87504-2088 P.O. Drawer DD, Artesia, NM 88210			30-039-20767  5. Indicate Type of Lease  STATE X FEE	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas Lease No. E-291-35	
SUNDRY NO	TICES AND REPORTS ON WEL	LS		
DIFFERENT RES	ROPOSALS TO DRILL OR TO DEEPEN ERVOIR. USE "APPLICATION FOR PER C-101) FOR SUCH PROPOSALS.)	OR PLUG BACK TO A RMIT"	7. Lease Name or Unit Agreement Name	
I. Type of Well: Oil. GAS WELL WELL WELL	_		Johston A Com	
2. Name of Operator	0.116		8. Well No. G #17	
Union Oil Company of  Address of Operator	California		9. Pool name or Wildcat	
•	e 200, Farmington, NM 87	7.401	Basin Dakot	а
Section 36 ////////////////////////////////////	Township 26N Ra 10. Elevation (Show whether 6567  k Appropriate Box to Indicate 1	GR	NMPM Rio Arriba Report, or Other Data	County
	NTENTION TO:		SEQUENT REPORT	OF:
ERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERINO	3 CASING
EMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLIN	G OPNS. PLUG AN	D ABANDONMENT
PULL OR ALTER CASING		CASING TEST AND C	EMENT JOB	-
OTHER: Check for leak	X	OTHER:	THE SECTION SECTION	1 C S C S
work) SEE RULE 1103.	verations (Clearly state all pertinent details, as	nd give pertinent dates, incl		2 1990
3. Set BP above p	eleanout. TOOH.		<b>5</b> 3	DN. DIV St. 3
4. TIH with 4 $1/2$	" packer on tubing and i	solate leak if	any.	7 0 - 01

Squeeze with cement; 65:35 POZ with 12% gel & 12 1/2 #/SK Gilsonite & 2% Ca Cl<sub>2</sub>.

Cleanout wellbore and pressure test leak. Drill up BP and push to TD.

- Run 2 3/8", 4.7#, J-55 tubing and land at 7,335'. 7.
- Release rig. 8.

I hereby certify that the information above is true and complete to the best of my know			
SIGNATURE	Petroleum Engineer	DATE	
TYPE OR PRINT NAME S.G. Katirgis		TELEPHONE NO.	
(This spece for State Use)	DEPUTY OIL & GAS INSPECTOR, DIST. #3	SEP 1 2 1990	

CONDITIONS OF APPROVAL, IF ANY: