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LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease  
State  Fee

5. State Oil & Gas Lease No.  
B-9948-6

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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator RONADERO COMPANY, INC.	8. Farm or Lease Name Rob-Clay State
3. Address of Operator P. O. Box 430, Roswell, New Mexico 88201	9. Well No. #1
4. Location of Well UNIT LETTER <u>F</u> <u>1980'</u> FEET FROM THE <u>WEST</u> LINE AND <u>1650'</u> FEET FROM THE <u>NORTH</u> LINE, SECTION <u>23</u> TOWNSHIP <u>12S</u> RANGE <u>32E</u> N.M.P.M.	10. Field and Pool, or Wildcat East Caprock-Devonian
15. Elevation (Show whether DF, RT, GR, etc.) 4336' GL	12. County Lea

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

- 10-29-84 pull rods, pump, gas lift valves and tubing
- 10-30-84 set retr bridgeplug at 10,447', set Halliburton RTTS tool at 10,196'
- 11-1-84 acidize Penn perms 10,318'-42' with 1,000 gals NICA 15% acid w/1 gal Hai 65 dropping balls @ 8 balls per 125 gals

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

SIGNED [Signature] TITLE Vice President DATE 11-5-84

APPROVED BY [Signature] TITLE \_\_\_\_\_ DATE NOV - 8 1984

CONDITIONS OF APPROVAL, IF ANY: