

OIL CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501

Form C-103
Revised 10-1-78

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.

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.)

OIL WELL GAS WELL OTHER

7. Unit Agreement Name

Name of Operator
Meteor Developments, Inc.

8. Farm or Lease Name
Santa Fe Pacific

Address of Operator
12842 Valley View St., Ste. 104, Garden Grove, CA 92645

9. Well No.
10

Location of Well
UNIT LETTER P 330 FEET FROM THE South LINE AND 990 FEET FROM

10. Field and Pool, or Wildcat
Crossroads Siluro-Devonian

THE East LINE, SECTION 22 TOWNSHIP 9S RANGE 36E NMPM.

11. Elevation (Show whether DF, RT, GR, etc.)
4034' Ground Level

12. County
Lea

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK
TEMPORARILY ABANDON
PULL OR ALTER CASING
OTHER

PLUG AND ABANDON
CHANGE PLANS

REMEDIAL WORK
COMMENCE DRILLING OPNS.
CASING TEST AND CEMENT JOB
OTHER

ALTERING CASING
PLUG AND ABANDONMENT

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.

6/01/88 Moved to wellsite and rigged-up. Pulled Reda cable and pump and 50 stands of 2 7/8" tubing. Laid down pump.

6/02/88 Technician serviced submergible pump equipment and re-assembled string. Protector and gas seperator replaced. RIH with 49 stands, 1 joint of 2 7/8" tubing. Re-built wellhead and energized well. Fluid pumped to surface in 3 minutes. Rigged down and cleaned location.

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

SIGNED Thomas M. Moore TITLE Vice President DATE June 21, 1988

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: