

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

WATER CONSERVATION DIVISION
P. O. BOX 2088
SANTA FE, NEW MEXICO 87501Form C-103
Revised 10-1-78

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
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.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. Unit Agreement Name
2. Name of Operator Coastal Oil & Gas Corporation	8. Farm or Lease Name Santa Fe
3. Address of Operator P. O. Box 235, Midland, Texas 79702	9. Well No. 6-2
4. Location of Well UNIT LETTER 0, 560 FEET FROM THE South LINE AND 1980 FEET FROM THE East LINE, SECTION 33, TOWNSHIP 9-S, RANGE 37-E, NMPM.	10. Field and Pool, or Whdcat West Sawyer (SA)
15. Elevation (Show whether DF, RT, GR, etc.) 3952' 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 type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Perforating and Acidizing

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.

10-20-81 Ran GR/N and CB logs TD 5020'
Ran 4" gun and shot 1-SPF as follows:
4926'-36' 4940'-4959' 4971'-4996'

10-21-81 Ran packer on 2-3/8" tubing to 4997' and spttd. 2 bbls. acid.
Treated with 21,000 gal. HCL in 3 stages using salt blocks
between stgs. Flush @ 526 BLW.

10-22-81 Prep to swab and test.

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

SIGNED Robbin Stephenson TITLE Production Analyst DATE 11-18-81APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY: