

DIS

P.O. 1 0, Hobbs, NM 88240

OIL CONSERVATION DIVISION

310 Old Santa Fe Trail, Room 206
Santa Fe, New Mexico 87503

WELL API NO.
30-025-07588

5. Indicate Type of Lease
FED STATE FEE

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 PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101 FOR SUCH PROPOSALS.)

7. Lease Name or Unit Agreement Name
S Hobbs
GRAYBURG / SAN ANDRES
U4

1. Type of Well:
Oil Well Gas Well Other INJECTOR

8. Well No. 36

2. Name of Operator
ALTURA ENERGY LTD.

3. Address of Operator
1710 WEST STANOLIND RD, HOBBS, NM 88240 505/397-8200

9. Pool name or Wildcat
HOBBS GB/SA

4. Well Location
Unit Letter F : 1980 Feet From The NORTH Line and 1980 Feet From The WEST Line
Section 3 Township 19S Range 38E NMPM LEA County

10. Elevation (Show whether DF, RKB, RT GR, etc.)
3617' DF

11. 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 OPNS. <input type="checkbox"/>	PLUG & ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: _____ <input type="checkbox"/>		OTHER: <u>TBG REPAIRED</u> <input checked="" type="checkbox"/>	

12. 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.

PRESSURE TEST CSG TO 700# FOR 30 MIN. CHART NOT WITNESSED BY THE NMOCID.

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

SIGNATURE Robert N. Gilbert TITLE LIFT SPECIALIST DATE 11 05 98
TYPE OR PRINT NAME R.N. GILBERT TELEPHONE NO. 505/397-8206

(This space for State Use) ORIGINAL SIGNED BY _____ TITLE _____ DATE DEC 29 1998
APPROVED BY _____ TITLE _____ DATE _____

JCS

