State of New Mexico Energy, Minerals and Natural Resources 2040 South Pacheco Energy Minerals and Natural Resources Energy Minerals and Natural Resources 2040 South Pacheco Energy Minerals Energy 1000 Resource Mark 1970  SUNDRY NOTICES AND REPORTS ON WELLS SUNDRY NOTICES AND REPORTS ON WELLS ENERGY Ene				_	
Energy, Minerals and Natural Resources	Submit 3 Copies To Appropriate District				
Old Conservation   Old Conserv	Office District I	Energy, Minerals and Natural Resources		WELL API NO.	
SIGNATURE    STATE   Fee No.	District II			5. Indicate Type of Lease	
State Of the South Pacheon, Sunta Fe, NM 87505   SUNDRY NOTICES AND REPORTS ON WELLS DO NOT USE TUSP FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A INFERENT RESERVOIR. USES "APPLICATION FOR PERMIT (FORM C-101) FOR SUCIAL ROPES SUCIAL ROPES AND REPORTS ON WELLS DO NOT USE TUSP FOR FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A INFERENT RESERVOIR. USES "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCIAL ROPES AND REPORTS ON WELLS DO NOT USE TUSP APPROVED BY TITLE DATE DATE DATE DATE DATE DATE DATE DAT	District III			SIMIL CONTRACTOR	
SUNDEX NOTICES AND REPORTS ON WELLS ON ONT USE THIS PORM POR PROPOSALS TO BRILD OR TO DEFERNO RE PLUG BACK TO A DIFFERENT PESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH OR WHILE COMMISSION MUST BE NOTIFIED 24 HOURS PROVED IN C.  1. Lease Name or Unit Agreement Name: Object of Satistian of Commission of Commi	histrict IV	**	7505		
Name of Operator	SUNDRY NOT DO NOT USE THIS FORM FOR PROPO DIFFERENT RESERVOIR. USE "APPLI ROPOSALS.)	TICES AND REPORTS ON WELLS	UG BACK TU A		
Address Operator P. 0. Box 3418, Midland, Texas 79702  Well Location  Unit Letter P. 990 feet from the South line and 990 feet from the East line Section 35 Township 195 Range 35E NMPM County Lea  10. Elevation, Chow whether DR, RKB, RT, GR, etc.)  11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SERFORM REMEDIAL WORK PLUG AND ABANDON SUBSEQUENT REPORT OF: REMEDIAL WORK PLUG AND ABANDON CHANGE PLANS  COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT  CASING TEST AND CEMENT JOB  OTHER:  C. 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. For Multiple Completions: Attach wellbore diagram of proposed completion  SEE ATTACHED PROCEDURE  THE COMMISSION MUST BE NOTIFIED 24 HOURS PROR TO THE BEGINNING OF PLUGGING OPERATIONS FOR THE C-103  TO BE APPROVED.  Thereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNATURE  William J. Savage  Telephone No. 915/686-0847  TITLE  DATE  DATE  DATE  DATE  DATE  DATE  DATE	Oil Well X Gas Well	Other		8. Well No.	
Address of Operator P. O. Box 3418, Midland, Iexas 79702  Well Location  Unit Letter P : 990 feet from the South line and 990 feet from the East line Section 35 Township 195 Range 35E NMPM County Lea  10. Elevation (Show whether DR, RKB, RT, GR,etc.) 3,50,20 (R)  11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON SUBSEQUENT REPORT OF: REMEDIAL WORK ALTERING CASING CHANGE PLANS COMPLETION CEMENT JOB  OTHER:  CASING TEST AND CHANGE PLUG AND ABANDON CEMENT JOB  OTHER:  CASING TEST AND CHANGE SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.  SEE ATTACHED PROCEDURE  THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE SEGINNING OF PLUGGING OPERATIONS FOR THE C-103 TO BE APPROVED  THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE SEGINNING OF PLUGGING OPERATIONS FOR THE C-103 TO BE APPROVED  THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE SEGINNING OF PLUGGING OPERATIONS FOR THE C-103 TO BE APPROVED  THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE SEGINNING OF PLUGGING OPERATIONS FOR THE C-103 TO BE APPROVED  THE PRESIdent  DATE /0/26/01  THE PRESIdent  DATE /0/26/01  THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE SEGINNING OF PLUGGING OPERATIONS FOR THE C-103  TO BE APPROVED BY THE PRESIDENT DATE /0/26/01  THE PRESIDENT MUST BE NOTIFIED 24 HOURS PRIOR TO THE SEGINNING OF PLUGGING OPERATIONS FOR THE C-103  THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE SEGINNING OF PLUGGING OPERATIONS FOR THE C-103  THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE SEGINNING OF PLUGGING OPERATIONS FOR THE C-103  THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE SEGINNING OPERATIONS FOR THE C-103  THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE SEGINNING OPERATIONS FOR THE C-103  THE COMMISSION MUST BE NOTIFIED 24 HO	2. Name of Operator Amtex Energy, Inc.			1	31doot
Unit Letter P : 990 feet from the South line and 990 feet from the East line  Section 35 Township 19S Range 35E NMPM County Lea  10. Elevation (Show whether DR, RKB, RT, GR, etc.)  11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data SUBSEQUENT REPORT OF:  REMEDIAL WORK PLUG AND ABANDON COMMENCE DRILLING OPNS. ALTERING CASING  COMMENCE DRILLING OPNS. PLUG AND ABANDONNENT CASING TEST AND CEMENT JOB  OTHER:  OTHER:  OTHER:  OTHER:  THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE EEGINNING OF PLUG GING OPPRATIONS FOR THE C-103 TO BE ATTACHED PROCEDURE  THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE EEGINNING OF PLUG GING OPPRATIONS FOR THE C-103 TO BE APPROVED BY  OTHER:  THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE EEGINNING OF PLUG GING OPPRATIONS FOR THE C-103 TO BE APPROVED BY  THE COMMISSION MUST BE NOTIFIED 24 HOURS PRIOR TO THE EEGINNING OF PLUG GING OPPRATIONS FOR THE C-103 TO BE APPROVED BY  TITLE President DATE 16/26/01  The space for State use)  TITLE DATE 16/26/01  TO BE SET TITLE DATE 16/26/01  TO BE SET TITLE 16/26/01  TO BE SET TITLE 16/26/01  TO BE SET TITL	Address of Operator			South Pearl	(Wolfcamp)
Section 35 Township 19S Range 35E NMPM County Lea  11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING   PULL OR ALTER CASING   MULTIPLE   COMPLETION   CEMENT JOB   DITHER:  2. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.  SEE ATTACHED PROCEDURE  THE COMMISSION MUST BE NOTIFIED 24 HOURS PROR TO THE SEGINNING OF PRUGGING OPERATIONS FOR THE C-103 TO BE APPROVED.  Thereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNATURE   William J. Savage   Telephone No. 915/686-084.  TITLE   President   DATE   DATE   DATE    THE COMMISSION TITLE   DATE   DATE   DATE    THE COMMISSION TITLE   DATE   DATE   DATE    TO BE APPROVED BY   TITLE   DATE   DATE   DATE    TO COMMISSION NO. 915/686-084.		diand, lexas 7970.			
10. Elevation (Show whether DR, RKB, RT, GR., etc.) 3,6/2 GR  11. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT CASING TEST AND CEMENT JOB  OTHER:  2. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.  SEE ATTACHED PROCEDURE  THE COMMISSION MUST BE NOTIFIED 24 HOURS PROOF TO THE BEGINNING OF PLUGGING OPERATIONS FOR THE C-103 TO BE APPROVED.  Thereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNATURE William J. Savage Telephone No. 915/686-0847  This space for State use)  APPPROVED BY:  TITLE DATE DATE  DATE DATE  PATILLE DATE	Unit Letter P :	990 feet from the Sout	line and	990 feet from th	e <u>East</u> line
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SIGNATURE William J. Savage TITLE President DATE 0/26/01  Type or print name William J. Savage Telephone No. 915/686-0847  (This space for State use)  APPPROVED BY TITLE DATE		Hours prior to the Plugging operation	BEGINNING O	F	
SIGNATURE William J. Savage TITLE President DATE 0/26/01  Type or print name William J. Savage Telephone No. 915/686-084  (This space for State use)  APPPROVED BY TITLE DATE	I hereby certify that the informati	on above is true and complete to the	best of my knowle	dge and belief.	, ,
Type or print name WITTUM 6. Savage  (This space for State use)  APPPROVED BY					DATE 10/26/01
(This space for State use)  APPPROVED BY	Will Will	liam J. Savage		Telephor	ne No. 915/686-0847
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