to Appropriate District Office	State Or Inew Err≃ny, Minerals and Natural R	iVIEXICO Resources Departmen	nt ee			orm C-10: ed 1-1-8:	
DISTRICT I	OIL CONSERVATIO P.O. Box 20	WELL API NO.					
P.O. Box 1980, Hobbs, NM 88240 Santa Fe, New Mexico		87504-2088		5-33727			
DISTRICT II 811 South 1st St, Artesia, NM 88210				ATE	FEE	X	
DISTRICT III 1000 Rio Brazos Rd, Aztec, NM 87410			6. State Oil 8	Gas Lease No.		· • · · ·	
SUNDRY NOTICES AND REPORTS ON WELLS							
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG			7. Lease Name or Unit Agreement Name				
BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"					- · · · · · · · · · · · · · ·		
(FORM C-101	I) FOR SUCH PROPOSALS.)						
1. Type of Well:							
OIL WELL X GAS WELL  2. Name of Operator		Maverick 16 State					
Nearburg Producing Company  Rearburg Producing Company			8. Well No. #1				
3. Address of Operator		9. Pool name	or Wildcat				
P.O. Box 823085, Dallas. TX 75		Wildcat - Delaware					
Well Location     Unit Letter J 2,300	: Feet From The Sou	th Line and	2,310	Feet From The	East	Line	
Section 16	Townshi 20S	Range 32E	NMPM	Lea		County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.)  3,511' GR							
11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data							
NOTICE OF INTE			•	ENT REPORT OF	=:		
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERING CA			
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OPNS. PLUG & ABAN					
PULL OR ALTER CASING		CASING TEST & CEMENT JOB					
OTHER:		OTHER: Surface Casing and Cement					
12. Describe Proposed or Completed Op	perations (Clearly state all pertiner	nt details, and give pe	ertinent dates in	cluding estimated da	te of starting		
any proposed work.) SEE RULE 1103.	, , , , , , , , , , , , , , , , , , , ,	, д		ordaning obtainiated da	ac or starting		
,							
at 918'. Cement cas	kC hole. RU and ran 2 sing w/720 sx plus add nd test. NU BOPE and	ditives. Circ 12	" 48# H40 : 26 sx to pit	ST&C casing. . WOC. Cut-o	Set casing	ng ,	

I hereby certify that the	information above is true and comple	te to the best of my knowledge and belief.		
SIGNATURE 4	nskuant	TITLE Secretary of Drlg and Prod	DATE	03/07/97
TYPE OR PRINT NAM	E Kim Stewart		TELEPHONE	915/686-8235
(This space for State U	se) Ginal signil by learn sext Butling a subervisor	ेN TITLE	DATE	MAR 12 1997
CONDITIONS OF APP	ROVAL, IF ANY:			

