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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.)

1. OIL WELL GAS WELL OTHER
2. Name of Operator: **Warrior, Inc.**
3. Address of Operator: **P. O. Box 2018, Eunice, NM 88231**
4. Location of Well: **UNIT LETTER F**, **2310** FEET FROM T.I.C., **W** LINE AND **1650** FEET FROM **North** LINE, SECTION **13** TOWNSHIP **21S** RANGE **35 E** N.M.P.M.
7. Unit Agreement Name
8. Farm or Lease Name: **State WE"B" Bty 2**
9. Well No.: **2**
10. Field and Pool, or Wildcat: **Rivers Eumont Yates 7 Queen**
15. Elevation (Show whether DF, RT, GR, etc.)
12. County: **Lea**

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input checked="" type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIATION 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 AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	OTHER <input type="checkbox"/>

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.

Following work has been planned for this well starting August 23, 1980.

Rig up pulling unit. Pull rods, pump and tubing. Clean out to TD, if necessary. Acidize with 2250 gallons 15% acid. Return to production.

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

SIGNED *J. P. Merchant* TITLE Consulting Engineer DATE _____

APPROVED BY Jerry Sexton TITLE _____ DATE AUG 10 1980
CONDITIONS OF APPROVAL, IF ANY: Dist. 1, Supp.