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## State of New Mexico

Form C-103

CONDITIONS OF APPROVAL, IF ANY:

to Appropriate District Office	Elicity, Millerals and Natural R	esources Department	Revised 1-1-89	
DISTRICT I P.O. Box 1980, Hobbs, NM 88240  OIL CONSERVATION DIVISION P.O. Box 2088			WELL API NO. 30-025-23962	
DISTRICT II P.O. Drawer DD, Artesia, NM 88210	Santa Fe, New Mexico 87504-2088		5. Indicate Type of Lease	
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			STATE X FEE 6. State Oil & Gas Lease No. B-934	
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  New Mexico "M" State	
I. Type of Well: OIL GAS WELL WELL X	OTHER			
2. Name of Operator			8. Well No.	
Dawson Operating Compa	any		60	
<ol> <li>Address of Operator</li> <li>P. O. Box 403, Midland</li> </ol>	l, Texas 79702		9. Pool name or Wildcat Jalmat Tans., Yates, 7 Rivers	
Well Location				
Unit Letter H: 14	10 Feet From The North	Line and90	Feet From The East Li	
Section 30	Township 22S Rs	ange 37E	NMPM Lea County	
Section 30	10. Elevation (Show whether	шкс	NMPM Lea County	
	3382 GL	NI-4 CNI-4' D	Name of the Part	
•	Appropriate Box to Indicate I		Report, or Other Data  BSEQUENT REPORT OF:	
NOTICE OF INT	ENTION TO:	308	SEQUENT REPURT UP:	
ERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING	
EMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	G OPNS. PLUG AND ABANDONMENT	
JLL OR ALTER CASING CASING TEST AND CE		EMENT JOB		
THER:		OTHER: Plug	Back	
Describe Proposed or Completed Operat work) SEE RULE 1103.	ions (Clearly state all pertinent details, an	d give pertinent dates, inclu	uding estimated date of starting any proposed	
Perforated Yates 2742- swabbed +/- 20 BLW & s 18,400 gal gelled wate	-66' w/2JSPF (48 JS), swabbed dry. 650' flui er & CO2 (50/50) contai ght. Bailed frac sand	Acidized 2742'- d entry overnig ning 27,000# 20	CNL-GR-CCL & CBL-GR-CCL logs66' w/2500 gal 15% NEFE HCl, ght. Stimulated 2742-66' w/ 0/40 & 23,000# 12/20 sand. 8165'. Placed on pump to	
		1		
I hereby certify that the information above is true	and complete to the best of my knowledge and	belief.		
SIGNATURE	<i>π</i>	r President	DATE 9-14-93	
TYPEOR PRINT NAME Jim A. Da	wson	September 1	тецерноне но.915-699-1	
(This space for State Use)	STANCE OF STANCE		DEC 14 19	
		E	DATE	