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P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

5a. Indicate Type of Lease
State Fee

5. State Oil & Gas Lease No.
L-3766

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. <input checked="" type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER-	7. Unit Agreement Name -----
2. Name of Operator Morris R. Antweil	8. Farm or Lease Name Lucky Larry
3. Address of Operator Box 2010, Hobbs, New Mexico 88240	9. Well No. 1
4. Location of Well UNIT LETTER <u>0</u> <u>660</u> FEET FROM THE <u>South</u> LINE AND <u>1980</u> FEET FROM THE <u>East</u> LINE, SECTION <u>5</u> TOWNSHIP <u>12-S</u> RANGE <u>32-E</u> NMPM.	10. Field and Pool, or Wellcat No. Caprock-Miss.
15. Elevation (Show whether DF, RT, GR, etc.) 4404' GR	12. County Lea

6. Check Appropriate Box To Indicate Nature of Notice, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:

PERFORM PERIODICAL 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 AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input checked="" type="checkbox"/>	OTHER <input type="checkbox"/>

7. 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.

Drilled 7-7/8" hole to TD 11,290'. Ran 351 jts. 5-1/2" 17# J & N casing and cemented @ 11,290' with 1050 sx. Class "H" cement containing 0.4% HALAD-22, 0.3% CFR-2 & 5#/sx KCL. Plug down @ 2:30 AM 18 May, 1980. WOC 8 hrs. Ran temperature survey. Top of cement 8410' PBTD 11,148' WOC. Will test casing prior to completion operations.

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

SIGNED R.M. Williams TITLE Agent DATE 19 May, 1980

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: