

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

WELL API NO. 30-005-20808
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. 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)

7. Lease Name or Unit Agreement Name Sanders
8. Well No. 1
9. Pool name or Wildcat Lightcap (Montoya)

1. Type of Well:
OIL WELL GAS WELL OTHER

2. Name of Operator
Crump Petroleum Corporation

3. Address of Operator
P.O. Box 50820, Midland, Texas 79710

4. Well Location
Unit Letter E : 1900 Feet From The North Line and 660 Feet From The West Line
Section 8 Township 8S Range 30E NMPM Chaves County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
RKB 4047'

11. 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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
OTHER: <u>Revised</u> <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
	CASING TEST AND CEMENT JOB <input type="checkbox"/>
	OTHER: _____ <input type="checkbox"/>

12. 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.

San Andres Recompletion Procedure:

1. Set CIBP @7000' and dump 35' cmt. on top.
2. Perf. at 3600'
3. Set cmt. retainer at 3560', circ. 250 sks class C cement.
4. Perf San Andres 3160-63; 3169-74
5. Acidize w/3500 gal.
6. Swab to test.

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

SIGNATURE Rita Cox TITLE Assistant Secretary DATE 3/20/90
 TYPE OR PRINT NAME Rita Cox TELEPHONE NO. 915/687-2008

(This space for State Use)
 ORIGINAL SIGNED BY JERRY SEXTON
 DISTRICT I SUPERVISOR

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY

MAR 22 1990

RECEIVED

MAR 21 1990

OCD
HOBBS OFFICE